

# CHEMIST & DRUGGIST

OVER THE  
COUNTER  
INSIDE

the newsweekly for pharmacy

February 23, 1991

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## PGC ready to ditch on-cost for higher fee

## Health leaflets now in N. Ireland

## £1.3m for needle exchange: no news on pay for LPCs

## Numark launches new loan scheme



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# CHEMIST & DRUGGIST

INCORPORATING  
RETAIL CHEMIST  
& PHARMACY UPDATE

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# COMMENT

While PSNC continues to split percentage points with the Department of Health in London, the initiative on improving pharmacists' remuneration has clearly moved North of the Border. PSNC's intentions for contractors in England and Wales remain shrouded in mystery. LPC delegates may wonder why they made the effort to fight through Monday's travel chaos only to hear PSNC chairman David Sharpe say the Committee was not prepared to discuss the matter while negotiations were still underway. Although there are whispers that PSNC is looking to reduce the level of front loading on prescription fees and boost the essential small pharmacy scheme, the main effort appears to be directed towards lifting the Department's initial offer of 8.3 per cent to a level acceptable to the factions within PSNC.

For the past 18 months the Pharmaceutical General Council has had its thinking cap on. Having put its proposals to the Scottish Home and Health Department (in an admittedly more sympathetic environment than PSNC has to contend with) PGC chairman Graeme Millar now feels sufficiently confident of the outcome to give a firm indication

of what may lie ahead (p276). Nothing is agreed yet — all hinges on the total sum put forward by the SHHD — but having got this far it would be a brave man who turns down a promising new direction for the sake of a percentage point. The window of opportunity may not last.

On-cost was originally introduced during the days of high inflation to protect a pharmacist's investment in an extensive stock of medicines. With inflation at a lower level, and Government initiatives through PACT and indicative budgets holding drug costs down, on-cost is arguably redundant.

By moving to a purely fee based system, linked to reimbursement of drugs at gross cost, the whole nightmare of discount and stockholding inquiries could be swept away leaving a greatly simplified banded scale of fees. The savings in administrative costs from this exercise for the SHHD (put by one PGC member at around 10-15 per cent) might provide Scottish contractors with welcome extra money in these hard times without having to make reference back to the Treasury. Or that is what Mr Millar is hoping.



# Scots to ditch on-cost for fee system?

Scottish contractors could find themselves being paid under a radical new remuneration system from April 1. Under the deal which the Pharmaceutical General Council is hoping to agree with the Scottish Home and Health Department, on-cost would be abolished and pharmacists paid on a straight fee per script.

Also on the cards are revised essential small pharmacy criteria coupled with a controlled compensation scheme to allow pharmacists locked into undesirable or uneconomic pharmacies to cease trading. The PGC is currently waiting to see if the Health Department is prepared to put sufficient money into this year's pay settlement to make the new deal acceptable to contractors.

The PGC meeting scheduled for February 20, at which chairman Graeme Millar hoped to give details of the final offer, has been postponed. The SHHD timetable appears to have been affected by activities in other areas, such as the agreement recently reached following the recommendations of the Doctors' and Dentists' Review Body.

"I do not think the settlement is waiting on PSNC," Mr Millar said this week. "How the Department is going to present the offer is affected by the possibility of phasing. This does not concern me as long as the total guaranteed sum is acceptable to the PGC." The 8.3 per cent offered to PSNC would be totally unacceptable to pay for the change in concept, he says.

There are obvious advantages in leaving on-cost and moving to a fee-based system in the light of the future role working party and the 'Working for Patients' document," says Mr Millar. "It would take away any perceived profit which has inhibited pharmacists from participating to a greater extent in a fuller health care role."

It will be the first time since the inception of the NHS that pharmacists will be paid a straight fee for their services as a health care professional, he adds.

But to ditch on-cost Scottish contractors are looking for a *quid pro quo* from the SHHD. Negotiations have reached their final stages and the decision rests with the Department, says Mr Millar. "It is the level of settlement that counts".

The move could mean a substantial hike in fee scales. For the first 1,300 scripts a month contractors currently get 130p per item. Assuming a normal settlement of around 10 per cent, this would rise to 143p. Bringing monies over from on-cost could mean another 40p, bringing the basic fee to 180-185p per item. Drug costs and container fees etc would continue as now.

The PGC has also made a strong case for a substantial improvement in the essential small pharmacy scheme, coupled with a re-assessment of the criteria. The aim is to introduce flexibility and give urban pharmacies incentive payments for relocation to areas of need.

Tied in with this are discussions on a controlled

compensation scheme which would allow the thinning out of smaller unprofitable pharmacies where they are bunched together in high street locations. Mr Millar emphasises, however, that the SHHD has repeatedly stated that it has no scheme or hidden agenda to reduce the number of pharmacies currently providing the service.

Mr Millar says 1991 is a big year for Scottish contractors, and the settlement reached could be totally different from that in England and Wales. Having promised a year of consolidation after the abolition of the cost plus contract, that interim period is now over, he says. "On-cost is not an anti-inflationary device with the current rate of inflation".

Although the concepts of revised criteria for the ESP and a compensation scheme might be accepted in principle this year, they are unlikely to become effective until 1992. Legal groundwork will have to be done, and there is insufficient time before April.

Moving to a straight fee system might be a way around the impasse of getting a review body for pharmacy, Mr Millar argues. Any pay offer made to doctors or dentists could be much more easily linked to pharmacists in a way understandable to politicians, confused by the existing system.

## Integrating pharmacists

Ways in which pharmacists can help in the integration of primary and secondary healthcare are outlined in a report by the NHS Management Executive this week.

The report says that community pharmacists and Family Health Services Authority pharmaceutical advisers are increasingly becoming involved in providing advisory and technical support to doctors and patients.

"As new techniques become established, the demand for such advice will continue to grow, and providing that advice will involve close working between community pharmacists and a range of health and other professionals", says the report. "This will often include liaison with hospital pharmacists and clinicians to establish regimes which can be safely continued in the community. RHAs, DHAs and FHSAs have an important role in ensuring collaborative working."

The report goes on to say that the rational and effective use of medicines will require the active contribution of pharmacists. The introduction of indicative prescribing, PACT and the Medicines Resource Centre should enable formulary management systems to be extended from hospitals to community prescribing.

## Extra places for role conference

Forty more community pharmacists will be able to attend the Conference on their future role.

The DoH says the Conference, on March 27, is attracting plenty of applications, so they are now planning for 200 delegates rather than 150. The vast majority of those attending will be "grass roots" community pharmacists.

The Department is also backing the Conference with a contribution to expenses of up to £50 on travel and a further £50 towards locum fees.

The Conference, to be held at the Society's headquarters, will be chaired by former Ombudsman Sir Cecil Clothier KCB, QC. It is part of the work of the joint working party on the future role set up by the DoH and involving all major bodies representing pharmacy in England and Wales.

The DoH hopes Health Minister Virginia Bottomley will open the Conference. Two further speakers are planned for the morning session, followed by six afternoon workshops, all reporting back to a final plenary session.

Community pharmacists wishing to attend should apply before February 28, stating their preferred afternoon workshop, to Rosemary Lunn, Conference co-ordinator, Department of Health, Portland Court, Room 127, 156-178 Portland Street, London W1N 5TB.

## £1.3m pledged to support needle exchange scheme

The Department of Health is to make £1.3 million available to encourage and support community pharmacist participation in needle exchange schemes, William Waldegrave, the Secretary of State for Health, announced at the PSNC annual dinner in London on Monday.

"I have been very impressed by pharmacists' involvement so far. Such schemes have made a vital contribution to reducing the spread of HIV," he said. Department officials will be holding talks to decide how the money will be used.

Mr Waldegrave mentioned this year's as yet unsettled pay talks only in passing. He hoped negotiations "would be concluded

shortly to mutual satisfaction".

He assured pharmacists that the separation of prescribing and dispensing functions has always been recognised as being in the best interests of the patient. Referring to the concerns raised by the recent report from the Doctors' and Dentists' Review Body, he emphasised that the Government remains committed to the present arrangements.

"A free for all is in no one's interests," he said. "But serving the patient is a joint responsibility, not a cause for rivalry."

The future role working party has got off to a good start, said Mr Waldegrave. "New services do need to be paid for, but we need to sort the principles out first."



# NI to join Pharmacy Healthcare scheme

Arrangements are being finalised for the inclusion of Northern Ireland pharmacists in the Pharmacy Healthcare consumer leaflets scheme.

Mr John Hunter, the chief executive of the NHS Management Executive in Northern Ireland, said the Government was fulfilling its pledge in the White Paper "Promoting better health" to assist in the provision of health education through pharmacies. Display stands will be provided, the DHSS will provide funding and monitor the material used.

Speaking at the Pharmaceutical Contractors Committee annual dinner last Friday, he said the role and status of post-qualification education and training had been under consideration by the Management Executive over the past year. While pharmacists have been anxious to see it set up as a free standing body, there have been legal difficulties.

"In the past few days progress towards a solution has been made, and we are hopeful that by April 1 PQET will have been established as a free standing body with a director," he said.

Mr Hunter said he was glad that the remuneration offer for 1991 had been accepted on the basis of "a constructive exchange of views", and hoped a 1991-92 settlement would be reached much earlier, "although this will depend to a large measure on the outcome of continuing negotiations in England and Wales, and Scotland".

Payments will be introduced from April for advice given to

residential and nursing homes and for maintaining patient medication records following agreement with the PCC, he said. An explanatory circular will be issued this week.

Potentially the most significant development affecting pharmaceutical services is the working party on the future role of pharmacists, he continued, and complimented the PCC on their initiative in making a submission. Northern Ireland has observer status on the working party, and invitations are being sought for PCC members to attend the open conference planned for March 27.

"As the delivery of health care becomes more sophisticated and new treatment possibilities emerge it is increasingly evident that we need to mobilise all the professions to secure the highest quality of service to the patient," said Mr Hunter. "The community pharmacist has an essential and key role to play in that process."

## Key points

■ Payments to be introduced for maintaining patient medication records and in respect of advice to residential and nursing homes from April.

■ Northern Ireland pharmacists to be included in the Pharmacy Healthcare scheme.

■ Post qualification education and training hopefully established under a free standing body with its own director by April 1.



The top table at the Pharmaceutical Contractors Committee annual dinner, held at the Culloden Hotel, Holywood, last Friday (left to right): Mr Graeme Millar, chairman of the Pharmaceutical General Council (Scotland); Mr John Hunter, chief executive of the NHS Management Executive in Northern Ireland; PCC chairman Mr Terry Hannawin; Mr David McConnell, PCC vice-chairman; Mr Robin Holliday president of the Pharmaceutical Society of Northern Ireland; and Mr S. Hodkinson, the general manager at the Central Services Agency

## Hannawin on the attack

The settlement recently reached between chemist contractors and the DHSS could be described as reasonable, given the Government's current attitude to the NHS, but in reality is totally inadequate, according to Pharmaceutical Contractors Committee chairman Mr Terry Hannawin.

"The present imposed remuneration package endangers the financial viability of community pharmacy, which remains an essential service to the public," he told guests at the PCC annual dinner last Friday.

"If the Government wishes to retain the goodwill of community pharmacists, it is imperative it recognises the value of the service they provide to the public in realistic financial terms and provide new money for this important and cost effective service," said Mr Hannawin.

Accessibility makes the pharmacist ideally placed to advise on health education and cost effective prescribing for GPs, and to carry out diagnostic testing. "We must continue to attempt to

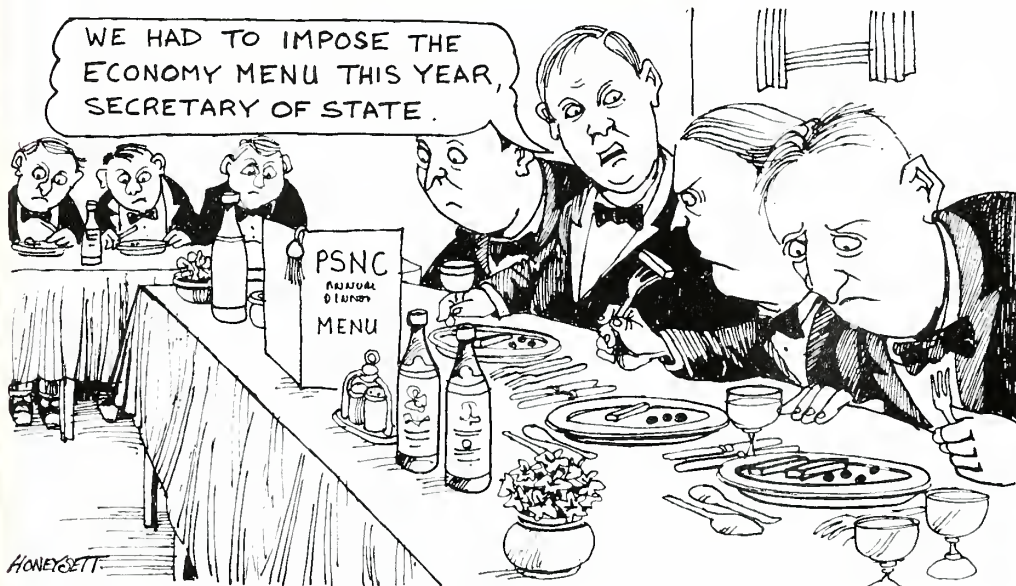
persuade the powers that be that we need a financial incentive to provide and develop these services for the benefit of the public," said Mr Hannawin.

## GP dispensing for review?

Concern over the activities of dispensing doctors in Northern Ireland has led the Pharmaceutical Contractors Committee to seek a meeting with GP representatives and the DHSS.

In 1987 the Department issued a circular on doctor dispensing which was agreed by both professions. The PCC has now requested a review.

In the Province GPs are not allowed to dispense for patients who live within two miles of a pharmacy or within half a mile of a bus route. However, in a number of areas this protocol is breaking down. Some 20-25 contractors are understood to be affected.



## DUMP by Courier

A new medicines disposal service has been set up by couriers in Fareham, Hants.

Hazelgrove Dispatch Partnership (tel: 0329 287634) are offering to collect, from pharmacies in the country, any unwanted medicines (but not Controlled Drugs, toxic chemicals or "sharps"). The material is taken the same day to the local authority incinerator where it is seen to be destroyed. The charge is a nominal £9.50 plus VAT per collection compared with about £40 charged by local authorities.

Hants LPC are recommending local pharmacies join the scheme.



# 1991-92 — agreement by April?

**Despite fears that Monday's LPC conference might be "bombed out" after the disruption caused by terrorist attacks at London mainline stations, over 200 pharmacists eventually struggled into Lambeth. Turnout among Peers and MPs at the annual dinner was also higher than expected. However it was, in general, a lacklustre day**

No news yet on a pay settlement for 1991-92, but both sides want to reach agreement before April was the stark message from PSNC chairman David Sharpe at the LPC Conference on Monday. PSNC has not yet met with the Secretary of State, but "there is no question in my mind that we will," he said.

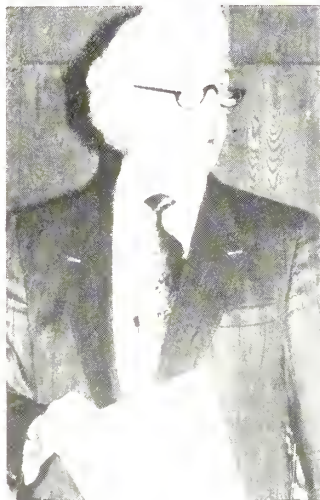
However, Mr Sharpe did reveal that because the estimated out-turn for core services (at £528.6m) is less than the figure imposed (£537.5m), the trigger mechanism has been activated. This means contractors are likely to receive a lump sum payment of around £8.9m, probably in September.

It would appear, comparing indices in 1980 to those in 1990-91, that contractors have done reasonably well in pay terms during the decade, said Mr Sharpe. But looking at the past three years, since the end of the cost plus contract, a different picture emerges (table 1). The average increase over the past three years has been just 2.8 per cent, he said, and the figures referred to were for remuneration, not discount or reimbursement.

Moving to the DoH offer for 1991-92 Mr Sharpe said that in addition to the £8.9m lump sum triggered from core services there was £1.8m promised on PMRs and residential homes which had not been taken up because of inaccurate forecasting. ■ Devon LPC chairman Mike Smith complained that LPC members only received information 30 minutes before being given a chance to discuss it. "It is difficult to make informed comment," he said. Was there not a window after the final offer when the conference could take place, he asked.

Mr Sharpe said he was sympathetic, but it was impossible to predict how negotiations would progress. In cost terms it did not make sense to have delegates travel to London on two occasions.

■ Robin Brown (Cheshire) showed how the global sum should have increased to take account of inflation. He presented figures taking account of deferred



David Sharpe

payments, taking them away from the year in which they were paid and adding them to the year for which the money was due.

The deferred sums were

£20.8m in 1988, £24.5m in May 1989 and £39m in September 1989. Taking a 1987-88 base-line of £474m and actual inflation figures in each April (3.9 per cent in 1988) the target of £492m was actually paid. But in the following two years the settlements reached were well below inflation-linked uplifts, said Mr Brown. Including this year's offer of 8.3 per cent, he suggested

contractors were looking at a cumulative shortfall over three years of £141m or £12,000 per contractor.

■ Alan Crabbe (Mid Glam) said more and more non-core services were likely to be provided in the future and there should be a trigger point on these payments as well. Mr Sharpe said it has been agreed that any new non-core services will be triggered.

## Prevention, promotion and education — a new theme?

Community pharmacists have their own catch phrase for the future — prevention, promotion and education — PSNC chairman David Sharpe told LPC representatives, MPs and Peers in a low key address at Monday night's PSNC dinner.

PSNC will soon be presenting its ideas based on this theme and with "positive and substantial benefits for all parties", to the future role working party. Mr Sharpe hoped they would not cause the Department of Health as much anguish as "recruitment, retention and motivation" have caused pharmacy contractors.

This year, again, remuneration

talks have not been concluded, but Mr Sharpe hoped on this occasion a satisfactory settlement could be reached without heated argument.

"I hope these discussions can take place at the highest level. What PSNC and Department officials want to do as quickly as possible is devote full attention to the expanded role community pharmacists could and should play in the NHS," said Mr Sharpe.

Without the pharmacist acting as a filter, surgeries would be crammed with patients, but to increase effectiveness pharmacists need more Pharmacy medicines, he said, drawing attention to the estimated £2.7 million saving in GP time and prescription costs from the deregulation of loperamide and topical hydrocortisone.

PSNC's 1989 pilot study into the viability of in-pharmacy cholesterol testing highlighted the public demand and suitability of the pharmacist to conduct such tests. PSNC plans to extend its research this year with a study into diabetes screening within pharmacies.

Pharmacists have an increasing role to play in the provision of domiciliary care, said Mr Sharpe. Around 10,000 residential homes currently benefit from pharmacists' services. "We believe these services should be extended to nursing homes and hospices."

He also called for the establishment of a nationally recognised needle exchange scheme, which will further encourage pharmacists in their general support of drug addicts.

Future roles depend on continuing education, said Mr Sharpe, and he looked to the Department for support. Pharmacists, for their part, must recognise that support is conditional on achieving high standards of practice.

Table 1: Pharmacist NHS remuneration

	NHS remuneration		Other indices		
	Due £m	Increase %	Retail prices %	Average earning %	Rx volume %
1987-88	485.8				
1988-89	507.1	4.4*	4.9	8.7	0.8
1989-90	517.7	2.2+	7.8	9.1	3.8
1990-91	555.5	7.3°	8.1	10.0	2.2

\* Pure profit reduced by Review Panel from 2 per cent to 1 per cent

+ Department struck out £39 million. ° Pay settlement imposed by DoH

Table 2: NHS remuneration 1991-92

	1990/91		1991/92	
	Imposed £m	Est out-turn £m	DoH offer £m	
<b>Core services</b>				
Graduated fees		386.1		424.5
POT fees		10.3		10.6
Other fees		17.4		19.3
ESPS		1.3		1.4
On-cost		113.3		124.7
	<b>537.5</b>	<b>528.6</b>		<b>580.5</b>
<b>Non-core services</b>				
Oxygen	8.7	8.2		9.0
Urgent	.5	.5		.6
Rota	3.6	3.6		3.8
PRT grant	1.3	1.9		2.0
Homes/PMRs	3.9	3.9		4.1
	<b>18.0</b>	<b>18.1</b>		<b>19.5</b>
Total payments 1991-92	<b>555.5</b>	<b>546.7</b>		<b>600.0</b>
Payment for 1990-91 (estimate)		— core		8.9
		— non-core		1.8
				<b>610.7</b>
Remuneration	555.5			600.0 = +8.0%
Cash flow	546.7			610.7 = +11.7%



## War forces AAH to cancel

AAH have cancelled the 1991 Vantage Convention in Athens because of fears of Gulf War-inspired terrorist attacks.

The Convention was to have taken place in mid-April at the Athens Hotel Intercontinental. "The safety of our delegates is uppermost in our minds and given the current situation in the Gulf, recent events in Athens and general concern about air travel, security and insurance cover, we have unfortunately had to take this unprecedented step," said Alan Turner, marketing director.

"Steps are being taken to ensure the Convention will be held in Athens in 1992," Mr Turner said.

## Full labels

Full ingredient labelling for all cosmetics is one step closer with the latest draft of the EC Cosmetics Directive.

The Directive also proposes that the definition of a cosmetic remains unchanged, the establishment of an inventory of ingredients used in cosmetics in the EEC, and the notification of formulations to poison centres.

The Cosmetic Toiletry & Perfumery Association says the full proposals will be printed in the *Journal of European Committees* this week.

## 1992 and all that?

Calling all community pharmacists fluent in French or German. The Society may need you!

The Royal Pharmaceutical Society is looking for community pharmacists with linguistic skills to travel to Germany and France.

The Paris Pharmagora '91 — in the form of an exhibition and conference — will be held from April 6-8. The organisers are planning a 12-sided stand at which each country in the European Community will have two members, who will be expected to answer questions about the practice of their profession.

And the Society is also looking for someone to give a short presentation at a German conference.

Anyone who feels they are suitable for either role is asked to contact John Ferguson, secretary and registrar, at the Society's headquarters.

# TOPICAL REFLECTIONS

by Xrayser

## Money-off whose bill?

Money-off coupons have always caused me attacks of irrational irritability since I take very few, but I am obliged by law to redeem them and then, either have to send them back to various addresses to obtain a full redemption, or send them to the NPA's Coupex system which, understandably, charges me commission.

To add insult to injury, occasionally coupons have been returned as out of date with payment refused, so I recently checked the expiries of a batch of coupons — they varied from no-limit, for Stafford Miller, to only 28-days for Yardley, with both companies using the same Nielsen Clearing House Scheme for redemption.

Yardley's example may be extreme, but it should not exist! Being given no choice in accepting these coupons is bad enough, but why should I lose my redemption rights because of arbitrary expiry limits imposed by companies to suit their own administrative convenience? Unlike the customer who has lost nothing if his coupon expires, I have already expended this money, and therefore, since the law obliges me to redeem these coupons to my customer, I should have equal rights of redemption from the issuing company, but with no time limit.

## Patients know best?

Psychosomatic illness is well known, but patients who swear allegiance to a particular brand of drug are often dismissed by pharmacists as cranks. The financial pressures of the NHS dictate that giving in to the whims of the patient will be severely punished by our paymasters, and in any case we know best! Co-proxamol is co-proxamol whether it has "DG" on the tablet or any other code. "Don't be fooled, Mrs Jones, believe me, they are all

the same. Take them with your eyes shut and you will never know the difference!

This superior, patronising attitude has always been justified by its accuracy, but a report on the effects of substituting generic carbamazepine for Tegretol at Leeds General Infirmary (*C&D* February 16, p229), appears to contradict previous conclusions. Despite the fact that the bioavailability and pharmacokinetics of both preparations were similar, two previously stable epileptics relapsed on the generic, but stabilised again when Tegretol was

reintroduced.

The "gung-ho" approach of which I am not guiltless must now be tempered by the knowledge that, from this undisputed empirical evidence with no satisfactory scientific explanation, perhaps sometimes, the patient does know best.

## No profit without pain

It was nice to have Mintel confirm (*C&D* Feature "Profit from Pain" February 16) that pharmacy is increasing its dominance of the OTC analgesic market. The introduction of ibuprofen has changed the market dramatically, turning the patients away from other outlets and back to the pharmacy, but we cannot be complacent. The trend towards stronger preparations and the promise of a plethora of compounded ibuprofen products in the cold and 'flu sector should allow us to consolidate this dominance and refute the political pressures to divorce dispensing from "pharmaceutical service" (*Comment*, *C&D* February 16).

The final arbiter of our need in the community is the patient. Convince him of our necessity by active involvement in the front shop and half our battle is already won. Stay in the back room and the vultures will continue to gather.





# COUNTERPOINTS

## Dana reveals Dark Secrets

Dana Perfumes and Tuesday's Girl cosmetics have joined forces to produce a new range of cosmetics for dark skins.

Called Dark Secrets, the range is reasonably priced and features a wide range of colours. To make the range easily accessible the counter display measures just 12in by 17in, say Dana.

Lipsticks come in 12 colours and cost £1.30. Matching nail varnish shades cost £0.99 each. There are four shades of face powder (£1.55), four mascaras (£1.55), two lipglosses (£1.35), three blusher trios (£3.15) and four singles (£1.65). Eye shadows cost £1.95 for a four pack and £3.15 for eights. Foundation comes in three shades (£1.65). *Dana Perfumes Ltd. Tel: 081-646 0344.*

## Higher protection from Orlane

Orlane have launched a sunprep range which contains bioflavonoids.

The range, Soleil Vital, includes Vital bronze accelerator (£9.50 125ml), a moisturising, non-oily gel for rapid self-tanning, with an SPF of 4. It is said to be ideal for all skin types and promotes a natural looking tan in about two days, says the company.

Vital sun block stick (£9.50) has an SPF of 25 and gives total protection to sensitive areas. It is said to be water and heat resistant. *Jean Patou Ltd. Tel: 071-328 1036.*

**Elizabeth Arden's** Immunage UV defence system range of suncare products has been awarded the "Seal of Recommendation" by the Skin Cancer Foundation in New York as "an effective aid in the prevention of sun-induced damage to the skin." *Elizabeth Arden Ltd. Tel: 071-224 1213.*



## Fruity Rap-eze joins Rennie for indigestion

Nicholas have launched a new brand of indigestion tablets into the fruit flavour sector of the OTC indigestion remedy market, in a move to increase their position in the £60 million market.

Rap-eze from Rennie is described as a fast and effective indigestion remedy in four flavours — lemon, orange, raspberry and blackcurrant. It is available in an assorted flavour pack and in a single flavour pack of the orange, most popular flavour (both 32s £1.05).

The dimple-shaped tablets, designed for a better mouth feel, are packed in blister strips of eight — two of each flavour. The dosage for adults and children over 12 is two tablets to be sucked or chewed as required, up to a

maximum of 16 a day.

Packs are colourful and "modern-looking", designed to appeal to the sector's young, predominantly female users. They feature a new type of tamper-evident seal, say Nicholas.

The launch is being backed by a £2.1m national television advertising campaign, together with promotional support that includes a sampling campaign and a stand at the 1991 Ideal Home Exhibition.

The fruit flavour sector of the indigestion market is growing rapidly, say Nicholas. They predict that it could represent 20 per cent of the market by the middle of the next decade. *Nicholas Laboratories. Tel: 0753 23971.*

## Larkhall produce booklet for coeliacs

Larkhall have produced "The Trufree handbook — getting safely started", a free booklet for coeliacs and gluten-free/wheat-free dieters.

It includes information about the conditions, with a list of safe foods, those to be avoided, risky foods and safe alternatives. It also gives hints about healthy nutrition, and features recipes

using Larkhall's gluten- and wheat-free Trufree flours.

Larkhall propose that the handbook be used as a "stop-gap" between diagnosis by the doctor and the first appointment with a dietician.

Free copies from *Rita Greer, Larkhall Natural Health, 225 Putney Bridge Road, London SW15 2PY. Tel: 081-874 1130.*

## Pride de la femme

Prideseek are launching Pride de la femme, a vitamin and mineral combination with royal jelly and aloe vera.

The capsules contain no gluten, grain, yeast, wheat, lactose, colourings, artificial flavourings, preservatives or added sugar, and so are virtually allergy free, says the company. Vegetarians should empty the contents (which are vegan) over food, and discard the shell.

In pink and white packs of 30 capsules (£9.45), Pride de la femme is positioned as a beauty supplement for women, and will be backed by a public relations campaign in women's magazines and national Press, sampling offers and other promotions. *Prideseek Ltd. Tel: 0604 881724.*

## Campaign for Colgate

Colgate-Palmolive are planning a "major" television and Press advertising campaign to support the Colgate oral care brand — the company is investing £12.5 million. *Colgate-Palmolive Ltd. Tel: 0483 302222.*

## Travelcaps

English Grains are launching Travelcaps to replace their Traveltabs adult and child formulations.

Travelcaps (12 blister-packed £1.25) are suitable for both adults and children, and are said to "help make your journey more comfortable". They are a herbal formula containing 250mg ginger, 10mg camomile and 10mg calumba.

Adults should take two capsules and children one capsule, with water, one hour before a journey. Another capsule may be taken one hour later if required. *English Grains Healthcare. Tel: 0283 221616.*



# No. No.

I do not  
want to  
buy a  
colour  
copier

**"Frankly, it's a stagnant market."**

Fact: The colour copier market is growing at around 30%\*

**"They don't come out very well."**

Fuji's photographic colour copy system offers premium quality with incredibly subtle tones and colour rendition.

**"I already offer a photographic enlargement service."**

With the AP5000 you can produce virtually instant enlargements from any original – prints from slides, print from print, OHPs, even copies from solid objects.

**"How can it help my business?"**

Copiers increase store traffic and offer excellent 'sell on' opportunities.

**"There's no demand for colour copies in my area."**

Most businesses now use colour in virtually all their presentations.

**"What does it do that I can't do already?"**

You can offer a virtually complete imaging service direct from your outlet.

**"The material is far too expensive."**

The cost of material for an A4 photographic copy is around £1, with typical selling price of around £4.

**"Nobody would know even if I did get one."**

Our point-of-sale pack will advertise your new service instantly.

**"Sounds too complicated."**

It's as easy as pressing a button.

\*COMPOUND ANNUAL GROWTH RATE (WHAT TO BUY IN BUSINESS – COLOUR COPIERS).

## Well, maybe...

PLEASE SEND ME DETAILS OF HOW THE FUJI AP5000 CAN ADD TO MY BUSINESS, WITHOUT THE NEGATIVES.

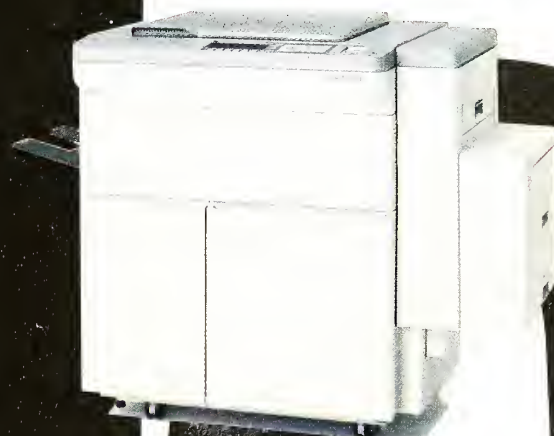
NAME

ADDRESS

BUSINESS

TELEPHONE  FAX

SEND TO: LISA BENSON  
FUJI PHOTO FILM (UK) LIMITED,  
PHOTOFINISHING DIVISION,  
FUJI FILM HOUSE,  
125 FINCHLEY ROAD,  
LONDON NW3 6JH.  
TEL: 071 586 5900  
FAX: 071 722 4259



AP  
COLORCOPIER







Regular customers  
regular sales!

# CLOCKWORK ORANGE

When customers come to you for advice on relieving the discomfort of their constipation, they may well expect you to recommend a laxative. But most simple constipation is caused by a lack of fibre in the diet. Doesn't it make sense then, to recommend that they relieve their constipation by increasing the amount of fibre they eat?

Unfortunately, many people may be unwilling or unable to change their diets to include more high fibre foods. This is where you can help, by recommending fibre in a glass — Fybogel Orange.

Because it contains Ispaghula husk, Fybogel Orange can help to replace the fibre missing from so many modern diets, easing the discomfort of constipation and restoring regularity. Fybogel Orange is a convenient, palatable drink, flavoured with natural orange. A natural choice for the management of constipation.

## Fybogel Orange

Ispaghula husk BP

### A GENTLE START TO NATURAL REGULARITY

**PRODUCT INFORMATION FOR PHARMACY RECOMMENDATION: FYBOGEL:** **Active ingredients:** each sachet contains 3.5g Ispaghula husk B.P. **Indications:** constipation, conditions requiring a high fibre regimen. **Contra-indications:** Fybogel is contraindicated in cases of intestinal obstruction and colonic atony. **Dosage and administration:** (to be taken in water) Adults and children over 12: one sachet morning and evening. Children 6-12: half to one 5ml spoonful, depending on size and age, morning and evening. Children under 6: consult your doctor. **Retail price:** at December '90 7 sachets 99p, 10 sachets £1.22. Product Licence nos. Fybogel Orange 44/0068, Fybogel 44/0041. Fybogel is a trade mark. Further information and display material is available on request from Reckitt & Colman Products, Hull, HU8 7DS, U.K.





## More Cutex colours

The Cutex range has been relaunched with the introduction of new colours, new packaging and some new nailcare products.

Lasting colour nail polish, available in 30 creme and pearl shades (£1.99), has added provitamin B5 for extra protection and conditioning, while UV filters help to maintain the colour, say Cutex. One coat quick-drying formula (£2.49) comes in 12 glossy creme and pearl shades. Strong nail (£2.49) contains calcium and minerals to form a strengthening coat while it colours; it is available in 15 creme and pearl shades.

The glass-bottomed bottles are elliptical in shape and the protective outer cap clicks off, leaving a smaller screw cap for easy handling.

Lasting colour lipstick (£2.49) contains provitamin B5 for moisture control, sesame oil as a natural emollient and UV filters. It is available in 30 creme and pearly shades, 20 of which co-ordinate with lasting colour nail polish. The lipstick cases are also elliptical.

The Cutex manicurist program is a comprehensive nail care collection comprising gel cuticle remover (£2.49) containing extract of camomile, cuticle cream (£2.49) for use after cuticle



remover, hand and nail treatment (£1.49), 10 emery boards (£0.49), professional nail repair (£2.79), nail strengthener (£2.79), silk base coat (£2.49), brilliant clear top coat (£2.49), fast nail dry ozone-friendly aerosol (£2.49), nail polish remover gel (£2.49), nail polish remover tissues (£1.29), nail white pencil (£1.29), and stopper (£2.79) — a clear polish with bitter taste to discourage nail-biting. *Rimmel International Ltd. Tel: 071-637 1621.*

## Colorama dealer contest

Colorama are running a 1991 "dealer of the month" competition following the success of the promotion in 1990.

To qualify, dealers have to show an increase in turnover compared on the same month last year. They must also have the current Colorama display material up and be able to respond with positive D&P knowledge to blind surveys made to counter personnel.

Winning dealers will receive

champagne, a pocket colour TV and a framed certificate of excellence. *Colorama. Tel: 071-261 1082.*

June Junipah salts are now available in 130g jars. The price remains unchanged. *Torbet Laboratories Ltd. Tel: 0622 762269.*

Following the recent shortage of RBC cream, stocks are now available through all usual wholesalers, say *Rybar Laboratories Ltd. Tel: 0494 722741.*

## Unichem March offers

Unichem are offering customers free porcelain wildlife figurines with every 12 cases of Smithkline Beecham Health Care and Personal Care items ordered in March.

To qualify for the offer at least a quarter of each order must come from each section.

Also included in Unichem's March offers are Salon Selectives shampoos and conditioners, Slim Fast, Wilkinson Sword and Replens.

A 44 per cent POR is offered on the Salon Selectives range. On Slim Fast a 34 per cent POR is on offer to pharmacists. The Wilkinson Sword range gives a POR of 30 per cent, and Replens 45 per cent.

Other products on special offer include Clearblue pregnancy tests, Permasoft, Toofy pegs and Benylin.

Permasoft will be available at a promotional price of £7.80 and Toofy Pegs for £7.43. Both prices are for six packs. *Unichem. Tel: 081-391 2323.*

## 20 pc more Compleat

Healthcrafts are offering 20 per cent extra free on packs of Compleat cod liver oil capsules, from February 25.

These special packs of 36 and 108 capsules will be available while stocks last, and are an incentive to encourage trial and stimulate repeat purchase.

The £35 million fish oil market showed a 70 per cent value growth in 1990, following the positive results of research into their benefits, say *Booker Nutritional Products. Tel: 0932 336366.*

## Sing along with Philips

Philips are giving away a free FM/AM personal stereo radio with every purchase of the Philishave Tracer between March 18 and the end of January 1992.

A sticker will highlight the offer on all Philishave Tracer models. Tent cards and leaflets giving information about how to claim the free gift are also available.

All the consumer has to do is complete the leaflet and send it off with a till receipt and a completed "service for you" questionnaire. The radio will be sent out within 28 days and the receipt returned, says the company.



Marketing manager Adrian Fleetwood says: "Tracer is just five years old. In that time its design and colours have been updated three times to keep it on target as the shaver for the young, style-conscious user. This new promotion has been designed to appeal to just that user." *Philips DAP. Tel: 081-689 2166.*

**Zorbit Babycare** have added a new single bed design to their junior range of duvets. Sam and Suzy (a dog and cat design respectively) are available in pink or blue colourways. The set comprises duvet and pillowcase. *Zorbit Babycare. Tel: 061 368 1961.*

## Products that work – for you and your customers

### KEST

**LAXATIVE TABLETS**  
A gentle yet highly effective laxative with strong customer loyalty  
Packs of 50

### TORBETOL

**ACNE LOTION**  
A non-keratolytic bacterial lotion for spots, pimples and Acne. Promotes rapid healing by destroying pimple-producing bacteria  
New 50ml pack for over-the-counter sales

### CHARCOAL COMPOUND TABLETS

### Carbellow

For the treatment of indigestion, flatulence, dyspepsia, hyperacidity  
Packs of 50 and 250 tablets

### ORAL PROCAINE CAPSULES

Plastic boxes of 30 and 150

These products are available from your local wholesaler and promoted direct to your customers.

### Torbet

LABORATORIES LTD  
MAIDSTONE, KENT ME14 1PF Tel: 0622 762269  
A British owned company



\*Trade Mark

### K.H.3

### BuZ Pel

NATURAL FORMULA

### E.S. BRONCHIAL MIXTURE

Extremely effective expectorant mixture which also soothes irritating coughs. 100ml pack

### BRONCHIAL MIXTURE

Extremely effective expectorant mixture which also soothes irritating coughs. 100ml pack

NATURAL FORMULA

### BuZ Pel

INSECT REPELLENT WIPES  
Individually sealed moist wipes containing synergised natural pyrethrum. Protects against midges, moths, mosquitoes etc., for up to 6 hours  
Attractively packed in 10's for impulse purchase and recommendation



# Judy Garland



Tau-Marin is a new range of high-quality toothbrushes, available exclusively through pharmacies.

Scientifically developed and clinically tested for a high standard of oral hygiene.

And available only through pharmacies because expert advice is essential to the correct choice and use of a toothbrush.

Studies on dental health education in the UK show clearly that while most people understand the importance of controlling plaque to fight tooth decay, few understand the problems of gum disease. And yet this is the biggest cause of tooth loss in adults.

Even the health-conscious don't find gums a pleasant topic of conversation. Gums are not glamorous. Which probably explains why Frances Gumm decided to enhance her singing career by changing her name to Judy Garland.

In the light of a widespread aversion to anything to do with gums, it is hardly surprising that most people only seek advice when they suffer the reddened and bleeding gums of gingivitis. But all too often, gum disease develops unchecked without displaying any obvious symptoms. Until it's too late, and otherwise healthy teeth are lost.

Tau-Marin toothbrushes make it easy to clean the teeth which are hardest to reach. They remove plaque and food residues while gently stimulating circulation in the gums. Together with Tau-Marin dental floss and anti-tartar brushes and toothpastes, they can make a substantial contribution to preventing the onset of gum disease.

The combination of quality products and first-rate advice has made Tau-Marin the best-selling toothbrush brand in pharmacies in Italy, its country of origin.

If you want to join the growing number of pharmacists who offer the quality of the Tau-Marin range in the UK, call Maria Diaz on 071-376-7999, or write to her at the address below.

Unlike Judy Garland, a new name won't get you an Oscar. But it may help your customers to achieve a winning smile.

The innovative Tau-Marin toothbrush with its distinctive slanted head is the result of considerable scientific study.

The 15° slant allows the brush to reach teeth at the back of the mouth much more comfortably.

Rounded synthetic bristles avoid damaging enamel and irritating the gums. The colours indicate alternate firmer and softer rows to remove plaque and stimulate good gum circulation.

The straight, rigid handle makes it easier to brush at the correct angle of 45° and the correct pressure of 120-150g.

more than  
a brush with  
science

**tau-marin**





## For some of your customers this is a Chamber of Horrors

**M**icroscopic House Dust Mites can't be seen with the naked eye, yet they are found in every home in Britain. They live on the skin scales shed by humans and animals, and are found in the greatest numbers in the mattresses and soft furnishings of bedrooms. Despite their size House Dust Mites are a serious problem. It's been clinically proven that they release potent allergens into the air, which are major 'trigger' factors in Asthma and allergic conditions such as Perennial Rhinitis and Eczema. So, for some of your customers, the bedroom can be a dangerous place.

### **New Actomite destroys the threat**

Actomite is an easy-to-use, effective, CFC-free spray. It is proven to destroy House Dust Mites,



their larvae and eggs so thoroughly that their numbers are significantly reduced for up to three months.

### **Actomite is spreading the word**

A £500k initial launch campaign will explain the danger of House Dust Mites and the solution nationwide, through full colour advertisements in the Women's and Parental press and informative FREE leaflets.

# ACTOMITE™

## Actively Controls House Dust Mites

Exclusively Through Chemists

100 Gold Cross and Searle Representatives will be telling the compelling story to Hospital Specialists and GPs too, combined with impactful advertising in the medical press. Stock and recommend Actomite now, help your customers to protect themselves and their families against the threat of the House Dust Mite.

**Searle Consumer Products**

PO Box 53, Lane End Road, High Wycombe,  
Buckinghamshire HP12 4HL.



# More Loving Care from Clairol

Bristol-Myers are investing £2 million to support the relaunch of their Clairol cover grey hair colorant range, Loving Care, and adding two new shades.

The new pack, which Bristol-Myers say was judged to be more appealing by 65 per cent of women surveyed, illustrates each shade and emphasises the fact that product contains no ammonia or peroxide and will not change the natural hair colour, just hide the grey.

The two new shades are beige blonde and reddish blonde, added after research showed them to be the most often requested shades not currently in the range, say Bristol-Myers. There are now 16 shades of Loving Care.

The relaunch will be supported by a television campaign, beginning in March, and Press advertising. For pharmacists, showcards, 50p off leaflets, display packs, counter cards, mobiles and door stickers, will be available.

"We want to do everything we can to support the pharmacist,"



says group product manager at Bristol-Myers, Karen Al-Mahdawie.

The company's latest study of usage and attitude towards hair colorants revealed that 35 per cent of the women questioned had coloured their hair in the past year, 18 per cent using a home colorant.

The two main reasons women colour their hair were found to be to cover grey or to liven up a "boring" hair colour. *Bristol-Myers Co Ltd. Tel: 0895 639911.*

## BRIEFS

**Cosmetics Plus** have brought out three new eye make-up products which combine creamy application and lasting powder finish. A jumbo powder creme eye pencil is said to be quick drying to a soft powder finish. Ingredients include shea butter, and it is lanolin-free and crease resistant. A powder cream eye shadow has been added, containing mineral oils, said to dry to a matte, lasting finish. To complement the two, Cosmetics Plus have brought out a powder creme eyeliner. *Cosmetics Plus. Tel: 0237 471771.*

**Five new titles** have been added to Coloplast's "Finding out" series of patient information booklets on all aspects of incontinence and continence care. They cover travelling with confidence, irritable bowel syndrome, nerve disorders affecting the bladder, incontinence aids, and intermittent self-catheterisation. There are now 20 booklets in the series, all of which are available free from *The Coloplast Foundation, Freeport, Peterborough Business Park, PE2 0BR. Tel: 0800 622124.*

**Inphormed** have brought out a device they claim stops snoring. Called Nozovent, it is made from plastic and, when inserted into the upper part of the nostrils, makes it easier to breathe, say Inphormed. It is initially available direct from Inphormed, priced £5.98 for two, at *Worthy Park House, Abbots Worthy, Winchester, Hants SO21 1AN*. However, the company intends to make Nozovent available through pharmacies. On orders of 15 units (one outer) pharmacists will receive a 33 per cent discount. *Inphormed. Tel: 0962 881421.*

**Bristol-Myers** are promoting their Mum deodorant range. A 20p money-off field coupon will be issued in conjunction with other manufacturers and a door-to-door direct mailing campaign is planned. The activity will support the new transparent packaging and there will be 20 per cent extra with every 60ml pack throughout March/April and August/September. *Bristol-Myers. Tel: 0895 639911.*

**Amber Tones** have launched the Vita Citral range, which consists of three hand creams and a liquid soap (300ml £5.99) which contains aloe, glycerine and vitamin A and is said to have anti-irritant properties; Karité cream (75ml £4.99), contains Karité fruit extract is said to leave a non-greasy, protective and nourishing film on the skin; and DHP cream (75ml £5.40), is said to help retard aging of the skin, and attenuate liver spots. *Amber Tones Ltd. Tel: 071-376 0774.*

## PILLS

— the every week story of pharmacy folk episode 44.

### "WE WERE AFTER SPEED"

said Tom Barker  
M.R.Pharm.S. of  
Bracknell, Berkshire.

"I tried the other main systems and only ended up kicking the fixtures. PILLS is fast and user friendly and the staff are friendly and helpful."

Patient Records  
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For a FREE,  
NO OBLIGATION  
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SYSTEM  
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Worcestershire DY13 9QB.  
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Fax: 0299 827393

## ON TV NEXT WEEK

GTV Grampian	C4 Channel 4	TV-am Breakfast Television
B Border	U Ulster	STV Scotland (central)
BSB British Sky	G Granada	Y Yorkshire
Broadcasting	A Anglia	HTV Wales & West
C Central	TSW South West	TVS South
CTV Channel Islands	TTV Thames Television	TT Tyne Tees
LWT London Weekend		

Benlylin:	GTV,U,STV,BTV,G,TT
Benlylin Day & Night:	A,HTV,TSW,TVS,LWT & TTV
Endekay dental gum:	C,LWT,TTV & TV-am
Finesse:	C,G,STV,HTV,TVS
Hofels Garlic Perles:	Y,A
Impulse:	All areas except CTV,TVS & TV-am
Inoven:	All areas except U
Just for Men:	All areas except A & TV-am
Lanacane Cream:	STV,HTV,C4
Libra Bodyform:	All areas except CTV,LWT,TTV & C4
Pearl Drops:	LWT & U
Radian-B mineral bath:	Y
Ricola Lozenges & Pearls:	TV-am
Seven Seas Berries:	All areas
Silvikrin haircare:	All areas
Slim Fast:	C4 & TV-am
Timotei shampoo:	All areas except CTV,TVS & TV-am
Vaseline Intensive Care Lotion:	All areas except U, TVS & TV-am
Veno's:	All areas





## Rimmel revamp

Rimmel International have introduced two display kits to support their Cachet and Noir fragrance ranges.

For Cachet, the display set, in soft pink, features three display boxes, a large dummy carton, large and small free-standing showcards and a length of pink fabric to drape across the display.

For Noir, merchandising material includes three display boxes, a giant dummy carton and a free-standing showcard. *Rimmel International. Tel: 071-637 1621.*

**A £100,000 Press advertising campaign for Minadox children's supplements**, starting on February 28, will run in national newspapers, say Seven Seas. Quarter-page advertisements, headlined "The easy way to put vitamins on your child's menu", feature the Mighty Minadox character and highlight chewable vitamins, multivitamin syrup and tonic. *Seven Seas Health Care Ltd. Tel: 0482 75234.*

**Numark** are promoting their baby feeders throughout March with two free feeding spoons with each product. Other products on offer include cotton wool and medicated pastilles. *Numark Management Ltd. Tel: 0827 69269.*

## Fuji fizz with film promos

Fuji have announced two 1991 film promotions, one offering a Swiss army knife and the other a free soft drink.

Between March 1 and May 31 customers buying any five Fujichrome process-paid films (not Velvia or Fuji-chrome professional) can get a free six-piece Wenger Swiss army knife if they send the boxes, till receipt and application form to Fuji.

The soft drink promotion relates to Fuji's Super HG films. Customers buying twin packs of Fujicolor Super HG will have a token to get a free 1.5 or 2 litre bottle of Tango sparkling orange drink.

This offer runs from March 1 to the end of September although retailers will be able to redeem the tokens until the end of the year. *Fuji Photo Film (UK). Tel: 071-586 5900.*

## Regency go five star

Regency Film Services have launched a new higher quality print service.

The Five Star print service provides customers with 5 by 7in date stamped prints, an extra quality check, sleeved negatives and prints presented in a high quality wallet.

The service is targeted at photographic enthusiasts using high specification cameras.

The turnaround time for the Five Star service is 72 hours compared to 24 hours for the normal service; this is due to extra quality check procedures.

The rrp for Five Star service is £6.49 for 24 exposures or £7.49 for 36 exposures. *Regency Film Services. Tel: 081-804 9921.*

## Kodak launch new 400

Kodak are planning to launch a new colour negative film said to offer improved response to electronic flash exposures.

Gold 400 is also said to minimise the bluish tones which are sometimes seen in pictures taken with electronic flash, by using a new technology which reduces the colour shifts between daylight and electronic flash exposures.

Kodak also believe they have improved the film's under-exposure latitude, extending its picture taking ability from ISO 25 to ISO 1600, a range four f-stops over and two f-stops under a

normal ISO 400 exposure.

Kodak Gold 400 will become available in May, replacing Kodacolor Gold 400.

The new film incorporates technology developed for the company's Ektar series of films, and has been designed to produce a high degree of stability over the normal range of customer use. It is also suitable for action and low-light photography.

Kodak have also announced that they will also be dropping the "Kodacolor" name; Kodacolor Gold films will be called Kodak Gold films. *Kodak Ltd. Tel: 0442 61122.*

### SCOTCHEM CORNER

## Travel news for visitors

### Newcastle

0930 hrs from central BR station Newcastle. Return from Ingleston to Newcastle central station 1530 hrs.

There is free parking for 20,000 cars. The exhibition centre is signposted on the A8 dual carriageway which runs between Edinburgh and the Newbridge interchange, linking to the following networks: the M90 to the North; the M9 to the North West; the M8 to the West and the M8-M74-A74 leading to the M6 South.

Buses and coaches pass within five minutes walk of the centre.

Visitors planning to stay in Edinburgh should phone 031 333 3036 for details of accommodation and rates.

**Hadley Hutt Computing** are offering a discount of £154 on their laser printer, making the price £799. This includes a metal stand which enables two printers to be stacked on it. And NPA members can get an extra 10 per cent off, making the cost to them £719, say *Hadley Hutt Computing. Tel: 0299 827826.*

The organisers of Scotchem are offering free travel to visitors who pre-register for the show.

Shuttle buses from three central points will take visitors to the exhibition centre at the MacRobert pavilion on Sunday March 10.

In addition, all those who pre-register and book a seat on one of the buses will be entered in the free prize draw for a bottle of champagne.

The organisers advise visitors to hurry if they still have not booked seats.

Times of the buses are as follows:

### Edinburgh

0915 hrs from Royal Terrace Hotel  
0930 hrs from Waverley station, then hourly from Waverley station to Ingleston at 1030, 1130, 1230, 1330, 1430 and 1530 hrs.  
Return from Ingleston at 1715 hrs to Waverley station and on to the Royal Terrace Hotel in central Edinburgh.

### Glasgow

1000 hrs from Central BR station. Return from Ingleston to Glasgow central station 1500 hrs.

The outlook is dry

# Ditropan

Oxybutynin hydrochloride



Further information is available from:

**SMITH & NEPHEW PHARMACEUTICALS LTD.**


Bampton Road, Harold Hill, Romford, Essex RM3 6SL. Telephone: 04023 49333. Telex: 898058 SMINEPG. Fax: 04023 71316 \* Trade Mark

Smith & Nephew






Mum  
is going to  
be even  
more visible.



In 1991, Mum and Mum Quick Dry will come in a new distinctive semi-clear pack.

So nobody has any excuse to run out.

Just in case, we're



adding an extra 5 ml of Mum for their money anyway.

And we're putting a TV spend of £2m behind the most popular roll-on, with a new campaign,



making it the biggest roll-on advertiser.

Now the reasons for stocking Mum couldn't be clearer.

**Mum. Gentle.  
Effective.**



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BRISTOL-MYERS CO. LTD, SWAKELLYS HOUSE, MILTON ROAD, TICKENHAM, CAMBRIDGE CB10 8NS. TELEPHONE 0895 669911 FAX 0895 669974 TELEX 926674





## Radian-B on TV until April

Radian-B mineral bath will be advertised on television from now until April.

The new commercial will initially be shown on Yorkshire television. It is aimed at core purchasers of the product, say Fisons, who are women aged 30 and over. The new advert shows

a modern bathroom transformed into a Roman spa, emphasising the product's soothing qualities.

The company will also be running in-store promotions in the Yorkshire region, offering the opportunity to win luxury bath towels. *Fisons Consumer Health*. Tel: 0509 611001.

## Bio-light on TVS for Spring

Bioconcepts are backing Bio-light with a Spring television campaign in the TVS region. The campaign will promote the detoxifying aspects of the natural herbal drink. It will link to a range of counter and window display material to be launched on March 1.

Bio-light Press advertising, in

magazines such as *Slimming* and *What diet and lifestyle*, is generating customer inquiries, which will be passed on when new stockists contact Bioconcepts.

Bio-light is available through Unichem, Macarthy, Vestric and Numark. *Distributors Bioconcepts Ltd*. Tel: 0705 678131.

**Smith & Nephew** will support their Nivea shampoo and conditioner range with a new campaign. Its main focus will be on the women's Press and the company is investing £6 million on promotional support for the entire range. *Smith and Nephew Consumer Products Ltd*. Tel: 021 327 4750.

**Fisons** say that the colour of Aspellin liniment has now been changed from yellow to clear. This follows the removal of both tartrazine and amaranth. The company says these colouring agents were unnecessary to the formulation. *Fisons Plc Pharmaceutical Division*. Tel: 0509 611001.

## Capasal shampoo for dry, scaly scalps

Dermal are launching Capasal therapeutic shampoo, a Pharmacy only product which they are now promoting to GPs and dermatologists.

It contains 0.5 per cent salicylic acid, 1 per cent coconut oil and 1 per cent distilled coal tar, and can be used daily if necessary for the topical treatment of dry, scaly scalp conditions including seborrhoeic dermatitis, psoriasis

and cradle cap.

Salicylic acid is included for its keratolytic properties, coconut oil acts as an emollient, and coal tar has antipruritic properties. The shampoo conditions the scalp while actively eliminating scales, say Dermal.

Capasal comes in 250ml packs (£4.95 trade) and retails for £7.57. *Dermal Laboratories Ltd*. Tel: 0462 458866.

### BRIEFS

**Ultraparm Ltd** have launched "an alternative to gluten-free bread". Ultra gluten free high fibre bread (500g £3.26) contains a mixture of gluten free whole grains, flours and seasonings. It has a shelf life of six months, and is prescribable (ACBS) as part of the gluten free dietary management of gluten sensitive enteropathies including steatorrhea due to gluten sensitivity, coeliac disease and dermatitis herpetiformis. *Ultraparm Ltd*. Tel: 0491 578016.

**Adizem 50mg tablets 100s** and **DHC Continus tablets 56s** are not being provided in their usual size of packaging, due to a national shortage of securitainers, say Napp. In order to maintain supplies, they are using larger securitainers for a limited period of four to six weeks. The product itself is unaffected by this temporary enforced change, say *Napp Laboratories Ltd*. Tel: 0223 424444.

**Cox** have launched two strengths of penicillamine. The white, capsule-shaped tablets are packed in securitainers of 100 (125mg £13.48, 250mg £23.26 both prices trade). Special introductory prices are available from representatives or on freephone 0800 373 573. *Cox Pharmaceuticals*. Tel: 0271 75001.

**Acupad NTS 1035** (rsp £98.90) is a portable stimulator unit said to relieve stress incontinence. It is not available on prescription. It provides a form of neuro-muscular stimulation therapy using low frequency electrical pulses. Recent clinical trials showed a 96 per cent success rate with no reports of discomfort or side-effects, say *Nidd Valley Micro Products*. The treatment programme lasts six weeks with further periodic sessions if required. The Acupad can be placed in a pocket or clipped to a belt and is supplied in a carrying case. *Nidd Valley Micro Products Ltd*. Tel: 0423 866375.

**Evans have launched** Clostet adsorbed tetanus vaccine, in a 0.5ml pre-filled syringe (10 £1.40). They have also changed the label of their dopamine hydrochloride strong sterile solution 800mg/5ml (5x5ml) which will now read 160mg/ml. There has been no change to the product, price or outer size. The 450g pack of glucose liquid has been replaced by a 250g size (6 £0.99, all prices trade). *Evans Medical Ltd*. Tel: 0582 608308.

**Antigen's** mefenamic acid 500mg tablets, available in 100s (**Specials** last week) cost £9.90 trade. *Antigen UK*. Tel: 0344 484743.

BRAND LEADER • FOR COLD SORES, CRACKED AND CHAPPED LIPS • HIGH PROFIT MARGINS  
NEW ADVERTISING CAMPAIGN THROUGHOUT WINTER IN NATIONAL PRESS AND TEENAGE MAGAZINES



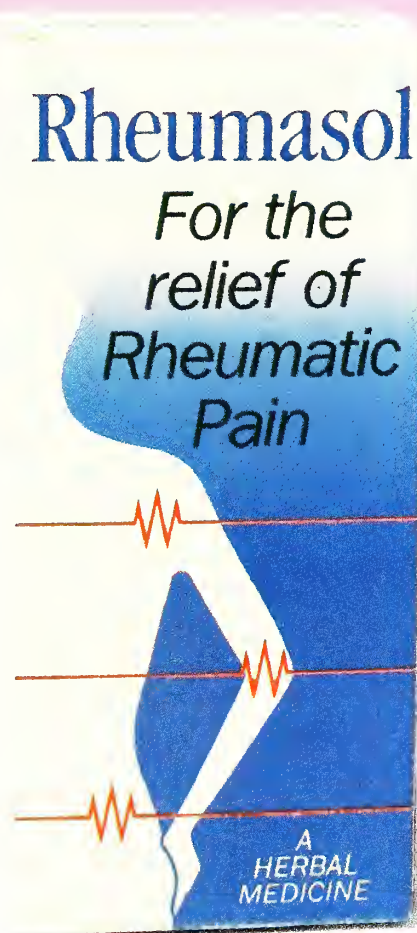
THE NAME ON EVERYONE'S LIPS



# Is there a Serious Herbal Alternative for the relief of Rheumatic Pain?

**F**or years people have turned to synthetic pain relievers as a respite against rheumatism, but, until now, there hasn't been a high profile herbal alternative that you can recommend with confidence.

Rheumasol is different. It is a GSL licensed herbal preparation that has been specifically prepared to tackle the problems of rheumatism head on.



There are no contraindications and, because of its herbal origins Rheumasol should appeal greatly to the growing market for natural remedies.

Supported by full colour advertising in women's press and a range of P.O.S. material (including an informative leaflet), Rheumasol is the herbal alternative for rheumatism.

And it's serious.





# Purley pharmacist wins relocation appeal

Purley pharmacist Shailesh Amin has won the right to relocate after Boots appealed against the original decision.

Mr Amin, owner of Tudor Pharmacy, had been granted permission by Croydon Family Health Services Authority to move from Russell Hill Road to a new Tesco superstore. Boots, who have a store in the High Street, appealed against the decision.

According to the FHSA's administration assistant, David Hicks, Boots were the only pharmacy to object but the original decision was upheld by an appeal panel.

The move was deemed to meet all the criteria for a minor relocation. Mr Hicks told *C&D*, as there was no significant change in

the population served.

Mr Amin told *C&D* that he was delighted with the decision. He had had a great deal of public support for the move with many customers seeing his fight against Boots as a David and Goliath situation.

Mr Amin is hoping to be ready for business when the superstore opens on February 26. "I think we'll do very well," he said. "We were a good chemist in a bad place for too long, now we'll be a good chemist in a good place."

The DoH's latest AIDS figures reveal that up to the end of January there were 4,228 cases of AIDS in the UK, of whom 2,375 have died. Figures to the end of December were 4,098 and 2,256 respectively.

# Nappy alert over 'rejects'

Disposable nappies found on sale in Northumberland could cause deaths, says the county's trading standards officers.

The warning follows the seizure of nappies from a market trader in Ashington by trading standards officers, alerted when a woman found her child had some fibre filling in its mouth.

The packs, containing 50 nappies and selling at £2.99, have clear plastic wrappers marked with a "reject" label. A large number have filling spilling out of

improperly formed seams.

Trading standards officer Raymond Hey said: "We are very concerned that people may have already bought some of these. It is vital they examine the seams very carefully before even considering using them. Our message is: if in doubt, throw them out."

Another trading standards officer told *C&D*, chemists were unlikely to be stocking the nappies. He said the problem appeared to be a national one. Inquiries are continuing.

# Vitamins help children's IQ

A new, and possibly final, chapter is to be added to the long-running controversy about vitamin and mineral supplements and children's IQ.

It started with the publication in *The Lancet* in 1987 of a study

involving 60 children using Larkhall's Tandem IQ. The results suggested that vitamin supplements could improve their intelligence.

However, nutritionists questioned this and a subsequent study, also published in *The Lancet*, could not reproduce the results.

Now a new study, due to be published and featured on BBC 1's "QED" on February 27, will prove that these supplements can boost children's intelligence, says a report in the *Sunday Express* (February 17).

The study, involving 1,200 schoolchildren in Britain, the USA and Israel, was devised by eminent professors John Yudkin, Linus Pauling and Hans Eysenck. It used a special supplement containing 23 ingredients.

The main findings, according to the *Sunday Express*, were:

- A definite improvement in brain function seen in considerable numbers of children in parallel studies in Britain and the US.

- Supplements appear to maximise potential IQ, helping the brain to work at maximum efficiency, rather than actually making it grow.

- Children who benefited were judged by the investigators to have dietary deficiencies in vitamins and minerals. But these included children on diets considered "normal".

Recommended daily allowances of vitamins and minerals may need to be reviewed, and new advice issued to the public.

Larkhall's chairman, Robert Woodward said: "I am delighted that the results of this extensive trial at last prove conclusively that vitamins help improve children's academic performance. This is just one case where the benefits to be gained from vitamins are easily measured and I hope that this will encourage sceptics to accept that vitamins are advantageous in other areas too."

## POSTBAG

## EPoS — the way forward?

I agree with your article (EPoS — the way forward, *C&D* February 2 p169) that most pharmacists have now realised that computers in pharmacy are here to stay, and with the advent of patient medication records have also found that their dispensing activity has been made more interesting and repeat prescriptions more efficient to process.

Now the pundits tell us its time to turn our attention to the shop side of things, to EPoS (electronic point of sale). This may be true for the majority, but there are those who have already had many years of hands on experience with EPoS — six years to be precise in my own case, day in and day out, so I couldn't imagine life without it!

All this was possible in pharmacy long before many other areas of retailing because of the introduction of the PIP code — a wonderful chance to be first, sadly lost because certain wholesalers chose to use their own codes, thus putting back the progress of EPoS in pharmacy until EAN was adopted by manufacturers.

For those who continued with the PIP code alone there have been six years of benefit in terms of stock control, staff reductions, effective price control, sales statistics to aid buying, and a general feeling that we know what's going on often without the need to be there.

Life with EPoS and PIP has been a honeymoon... now to be

complicated somewhat by the use of bar codes which increases the cost by the need to maintain a much larger than needed data base, let alone a separate code for every variant of the same product.

So what are the lessons to be learnt from six years with EPoS?

A system worth anything is one which is totally versatile in usage at all times, coping with the rich variety of life in a retail situation. At the same time it must manage sales at the counter, stock arriving at the back door, new cost prices, and ticketing and getting the goods onto the shelves within two hours of arrival of a 250 line wholesale order of mixed goods. It must provide instant sales statistics to take advantage of a rep's offer, plus a smooth fill up operation of the shop with goods sold the previous day — a

process now achieved in half an hour using one girl compared to four hours with two girls. Any or all of these occur at the same time in the busy retail pharmacy, with the dispensing on top.

One reasonably priced solution to this is to use a system written in concurrent DOS which gives the user up to four screens on any one of three users at the same time (excluding the till which I believe should be used for sales only). My bookkeeper lives two storeys above the shop with her terminal and telephone...but that's another story. Flexibility is the name of the game to cope with retail pharmacy at its worse or best. It's a way forward, for the brave.

Colin Thomas  
Worthing

# Lloyds/Barley lessons

The information you give in *C&D* February 16 on the purchase of Barley Chemists by Lloyds is, I suggest, well worth study by pharmacists, proprietors in particular. The importance of arriving at an "adjusted" net profit when assessing a business is highlighted. After such adjustment a net profit of £43,000 expands to £811,000, a difference of £768,000.

The price of £5.6 million now appears reasonable if an immediate return on investment of approximately 14.5 per cent is acceptable. Such a return is considerably more than many private pharmacists are making.

The return on capital can be misleadingly over-estimated. The investment in a pharmacy is what it *would currently sell for*, lock, stock and barrel. This is the sum which would be available for investment if the business were sold. The *historical cost* of the pharmacy is irrelevant for the assessment.

The deal also emphasises the importance of keeping administrative costs to a minimum. And the economies of scale!

Eric Jensen  
Brighton





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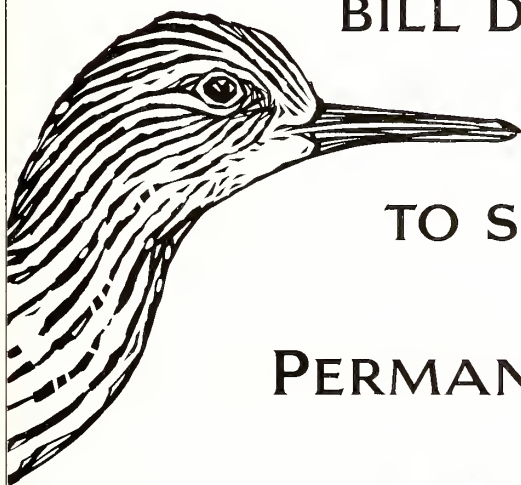
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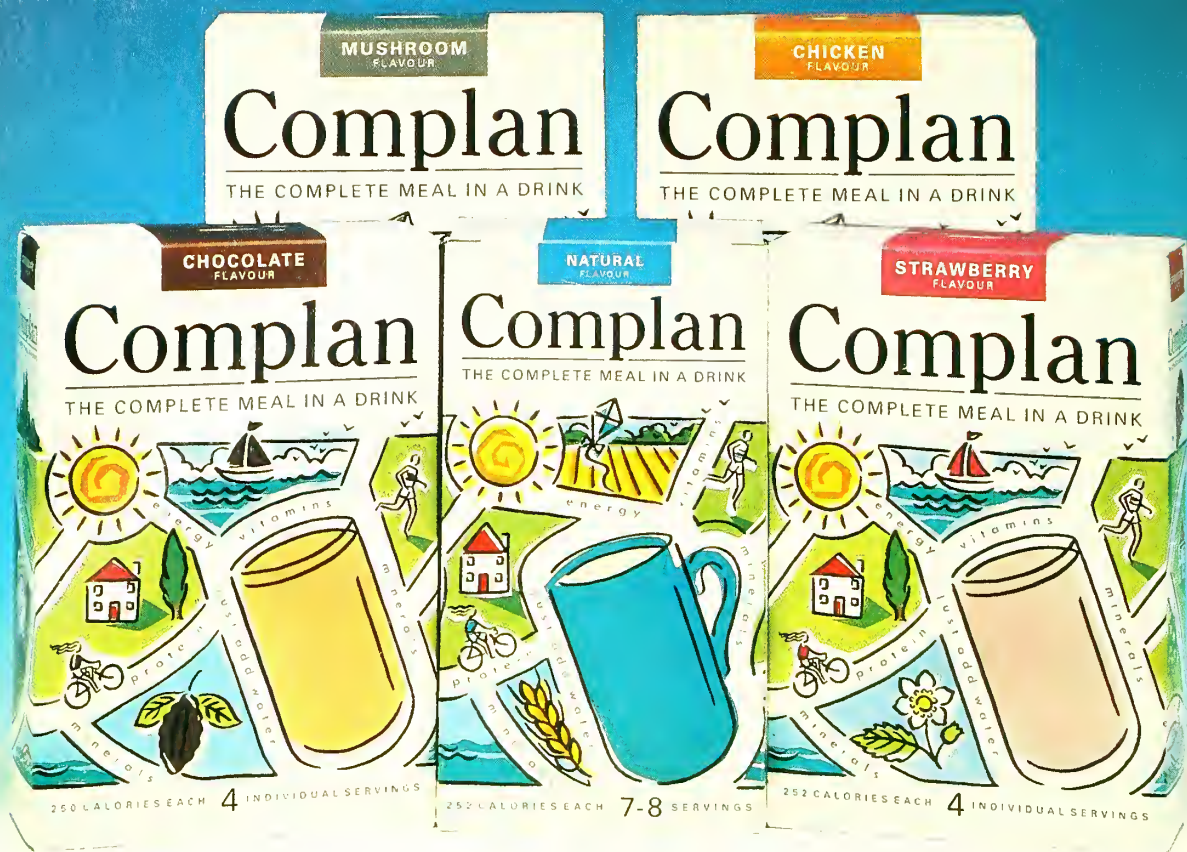
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# Successful shake-up for Complan

**With news to get 1991 off to a cracking start, Crookes Healthcare have confirmed their intention of achieving even higher levels of success for Complan. The brand-leading complete meal in a drink is to receive the backing of a comprehensive support programme designed to continue the shaking-up process of consumer perceptions — and pharmacy sales — instigated some 18 months ago. Complan has gone from strength to strength and we look at how the brand that pharmacists throughout the UK rely on for proven sales performance is staying well ahead of the competition**



## Going for growth

Since 1989 Complan has worked steadily towards its goal of appealing to a wider audience of consumers, and the brand can now claim credit for a 30 per cent increase in overall sales. According to Nielsen, Complan accounts for a 77 per cent volume share of the £7 million nutritional beverages market in pharmacies, an increase of 10 per cent year-on-year.

Traditionally Complan has been respected for its use by the ill and the elderly. As a complete meal in a drink, Complan provides balanced nourishment with all essential vitamins and minerals. In addition, Complan offers consumers a number of advantages which they clearly feel are hard to beat: it's convenient and easy to mix with hot or cold water; it's a great stop-gap for when there's no time for a balanced meal, and last but by no means least, Complan tastes great, a key factor to the brand enjoying its highest rate of sale to date (Nielsen).

But it was the 1989 decision to go for growth which has won Complan the kudos of being one of the most exciting and successful relaunches to take place. When research proved what Crookes Healthcare had always felt — that Complan would have strong appeal for many groups of consumers looking to benefit from the attributes of a healthy meal in a moment — there was no holding back.

A £2 million relaunch programme included vibrant repackaging, a brand new national TV and Press campaign, a major sampling operation and attractive promotions such as the on-pack offer of a Crocodile Dundee video. Combined with the more recent test market of new Banana flavoured Complan, these have all been contributing factors towards Complan's





### Complan goes bananas

Complan is already available in five sweet and savoury variants — Strawberry, Chocolate, Chicken, Mushroom and Natural — but the recent addition of a new flavour is being viewed as a big boost for the brand-leading meal in a drink. Banana Complan has now been on test market in Scotland, Tyne Tees, County Durham and Cumbria for some four months and Crookes Healthcare report good sales. Group product manager Judy Lord says 'We are determined to broaden Complan's appeal among increasingly wide groups of consumers. Banana is already proven in terms of being an extremely popular flavour and we are confident of good results in the test.'

improve our mutual business.

'For example, we know from experience that pharmacists will improve the rate of sale of all variants by increasing the number of variants stocked, ie increasing from three to four, or four to five. In addition we are concerned to help pharmacists achieve better point of sale and more attractive displays to provide the extra prompt to purchase.'

Pharmacists who would like shelf edgers or advice on better and more effective display should contact their Crookes Healthcare representative or write to the company direct at the address below.

considerable success over the last 18 months.

### New challenges

The challenge now facing Crookes Healthcare is to take Complan even further. Group product manager Judy Lord comments: 'While Complan still has great appeal for convalescents and the elderly, also it has become a brand for anyone looking to replace a meal with a healthy and nutritional drink. Complan is now being used regularly by a far wider proportion of the general public, including athletes, pregnant and breastfeeding women, and slimmers, as well as anyone in need of a tasty energy boost.'

'The future is undoubtedly looking good but we've no intention of being complacent. Crookes Healthcare are well known for backing their brand leaders with all the support the leading healthcare company can muster, and we have no plans for Complan to be the exception to the rule!'

### Promotional plans

Ms Lord is keeping quiet about promotional plans for 1991 but the indications are that it will be an action-packed year for Complan. Creative treatments are still in the pipeline but it's certain that Crookes Healthcare will be looking for maximum impact — as many a housewife who remembers the naughty television campaign featuring a naked male hunk holding his Complan will testify!

In addition, pharmacists can expect Complan to receive the backing of innovative on-pack offers and public relations initiatives, as well as a comprehensive programme of trade support. 1991 kicks off with a number of sampling exercises in mainstream women's consumer and parentcare Press, including magazines such as *Chat*, *Slimmer* and *Baby*.




### Opportunity knocks for pharmacists

All this augers well for the pharmacist keen to maximise sales opportunities as current users are reminded of Complan's benefits and new users are introduced to the brand. As Ms Lord points out: 'Pharmacists are uniquely placed to take advantage of their professional training by providing advice and information which cannot be equalled in the High Street, and by encouraging customers to turn to their local pharmacy for all their health and well-being requirements. Complan can play a vital role in helping a pharmacist to build his business, and throughout the coming year we will be working closely with pharmacists to

### New booklets, new users

A whole series of new literature is now available — and free — to consumers. Specially developed to introduce Complan's unique nutritional advantages to new groups of consumers, Complan's literature library includes: 'The front runner' for athletes and sportspeople; 'Putting you first' for pregnant and breastfeeding women; 'A healthy diet for slimmers' for weight-watchers; 'A healthy choice for you' for the over-55s; and 'Great Shakes' for busy people. Copies are available on request by writing to the following address: Ailsa McKnight, Crookes Healthcare Ltd, PO Box 94, 1 Thane Road West, Nottingham NG2 3AA





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In fact, your success at unchaining smokers from their nicotine addiction has made Nicobrevin Number 1 in OTC sales.

**Nicobrevin is currently being supported with Advertising during the Budget and National No Smoking Day, so expect demand to rise sharply.**



**INTERCARE**

**Nicobrevin**

\*NICOBREVIN\* is a registered trade mark.



# Pharmacists well placed to help those who want to give up

Pharmacists are in many ways better placed than doctors to help people who want to give up smoking, says Allan Norris, a clinical psychologist at the University of Birmingham.

"The pharmacy is useful for opportunistic one-to-one counselling which tends to be more successful," he told a specially convened pilot workshop on the role of the pharmacist in smoking cessation. "Compliance tends to be better; patients regard it as important because of the individual attention.

"Many people don't give up because they don't think they can. So give examples of people like them who have given up, express your own confidence in them. And if you ask them to come back and tell you how they are getting on it shows a real commitment."

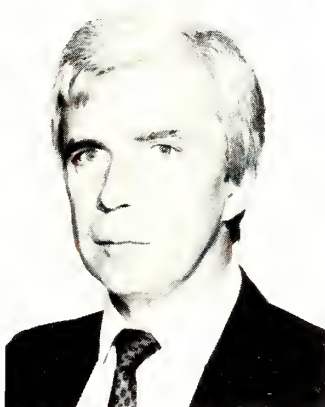
His view was echoed by GP and director of the smoking cessation clinic at the University Hospital of South Manchester, Chris Steele.

"Leaflets and advertising are not the same," Dr Steele said. "Smokers will tell you 'It's for ill people or heavy smokers'. But when a health professional says 'yes, you should give up', it's not so easy to reject because it's personalised.

"Back it up with 'I can help you'. People want a health professional to help them. And doctors have in the main failed because they have been heavy handed — the 'stop or you will get...' approach." Pharmacists are also in a good position to offer follow-up encouragement, another area where doctors had gone wrong, Dr Steele said.

The change from smoker to non-smoker requires an attitude change. "Smokers have a psychological problem. Ninety per cent of them believe smoking causes lung cancer, but they don't say 'I smoke, therefore I'm stupid'; they rationalise. They resolve the inconsistency by saying they are healthy. 'My body will tell me when it's time to give up. I'm not a heavy smoker. I only smoke 40 a day'.

"Somebody seeks your advice. You tell them to stop smoking — you might be able to relate it to something they are buying OTC — and you introduce the discomfort people feel when you question their beliefs. Psychiatrists call it cognitive dissonance," Dr Steele said. It



Allan Norris

may cause an attitude change, which may eventually produce a behavioural one.

Smokers don't stop because the consequences are seen as remote — cancer and coronary heart disease happen to "somebody else". Addiction, lack of education and fear of weight gain play a part too.

Said Dr Norris: "Smoking fits all the definitions of addiction — if smokers are deprived of cigarettes, they tend to find other forms of nicotine. Coal miners use chewing tobacco and snuff, men who give up cigarettes turn to cigars and pipes. And withdrawal is aided by nicotine supplementation."

Dr Norris said most smokers smoke 15-20 a day, which seems to relate to the 35-40 minute half-life of nicotine in the body. They smoke to reach what for them is a comfortable level of nicotine in the blood.

"Think of smokers first thing in the morning. A nice way of assessing addiction is to find out how soon after waking a smoker has his first cigarette," added Dr Steele.

It is difficult to give up. One year on, only a quarter to a third are still abstaining. "It's hard for smokers," said Dr Norris. "They have to stop both the habit and the addiction."

Dr Steele agreed: "To stop a repetitive hand to mouth activity performed, say 10 times per cigarette, 20 cigarettes a day, that's 73,000 times a year, is very difficult."

And most smokers don't feel any benefit after giving up. "Health promotion leaflets tend to paint a rosy picture," said Dr Steele. A carbon monoxide meter will demonstrate one benefit (a

simple one costs around £200). "Carbon monoxide levels in the blood drop within 24 hours of giving up," said Dr Steele. The meter measures levels of carbon monoxide in the breath. Typically a non-smoker registers 5 ppm above ambient and a smoker more than 15 ppm above ambient.

Leg pain caused by claudication is one of the few conditions where patients can feel a benefit within a week of stopping.

"Most peripheral vasodilators are absolutely useless, but



Dr Chris Steele

doctors seem to forget smoking cessation because it's not high tech medicine," Dr Steele said. "On giving up, the claudicant has more oxygen in the blood so circulation gradually improves."

## The role of pharmacists

1) Opportunistic checks on smoking

2) Assessment of patient attitudes to smoking

3) Offering friendly advice to quit. Suggest:

a) An abrupt, total stop. Cutting down doesn't work

b) An agreed date to stop — see the patient on that day

c) The patients plan their campaign

d) The interval to "giving up" day is used to develop motivation

e) Practical tips

— get rid of cigarettes, ash trays etc — it's easier if there are no cigarettes around

— clean out the house and car so they are like a non-smokers'

— cash not ash — save money in the place the ashtray sat

— take one day at a time (withdrawal symptoms don't last)

— avoid danger times. It might mean not going to the pub or meeting smoking friends for a week

— if all else fails, wait five minutes. The chances are the urge will pass

— no occasional cigarettes

f) Give the patient confidence

4) Follow up repeatedly in the early stages

## Encouraging no smoking

● Have "No smoking" signs in the shop

● Advertise only for non-smoking staff

● Raise the subject with patients when appropriate

● Offer advice on quitting

● Give out health promotion booklets personally

## NPA to organise workshops

Drs Norris and Steele were speaking at a pilot workshop organised by the National Pharmaceutical Association in association with Lundbeck, makers of Nicorette.

When Lundbeck finally get the go-ahead to launch an OTC version of Nicorette 2mg (licence still awaited from the Department of Health), the NPA hopes to organise workshops for its members throughout the UK, NPA director Tim Astill said.

He hoped to be able to repeat the workshop as "often as we can

get an audience of pharmacists".

The training session follows the format of Lundbeck's programme for GPs, endorsed by the Royal College of General Practitioners, which so far has been attended by over 3,000 GPs. "It has been very successful," said Lundbeck's managing director David Hubber.

"It's part of the GPs' vocational training scheme, and we extended to practice nurses in 1988, and in 1989 started to tackle smoking in the workplace with industry."



# A BRAND NEW PACK FOR THE BRAND LEADER

Stoppers has long been the unit brand leader\* in the anti-smoking aids market, and we intend to keep it that way.

We've redesigned the pack so that it's easier to handle, with new graphics to increase customer appeal and create more impact on-shelf. The new packs will be available from the end of February.

Consistent advertising will continue throughout the year with new copy and extra activity around National No Smoking Day in March.

The new price of £1.99† makes Stoppers an inexpensive anti-smoking aid, and that means greater consumer acceptance and greater sales.



Charwell Pharmaceuticals Ltd, Charwell House, Wilsom Road, Alton, Hampshire GU34 2TJ. Telephone: (0420) 84801.

\* Source Nielsen September/October audit.

† Price effective March 1st 1991.





# Let's 'packet in' on No Smoking Day, March 13

No Smoking Day, one of the UK's most successful health education campaigns, will take place this year on March 13.

This year smokers are being encouraged to make a "packet in pledge" not to smoke on the day, non-smokers can become "packet in pals" and special "let's packet in" stickers on bins throughout the country will encourage smokers to chuck their packets away for the day — or even for good.

No Smoking Day aims to help smokers quit for the day and raise awareness of the benefits of giving up. Recent research suggests that up to half of all smokers want to give up, and the more times they try, the more likely they are to succeed.

The Health Education Authority says that on No Smoking Day last year 2.7 million smokers tried to give up for the day, with 50,000 of them using the day as a springboard to give up completely, including television presenter Anne Robinson who

gave up her 40-a-day habit in front of millions of viewers.

The organisers say workplace smoking policies are fast becoming the norm. This year they are looking to involve employers in pledging money to charities, or by holding prize draws with gifts for employees who "packet in" on the day.

In public places increased support for smoke-free areas will be promoted as transport bodies, retailers and local authorities are asked to use "packet in" bin stickers.

In schools and colleges, the "packet in" programme has been designed to encourage young people to help friends and family who want to quit.

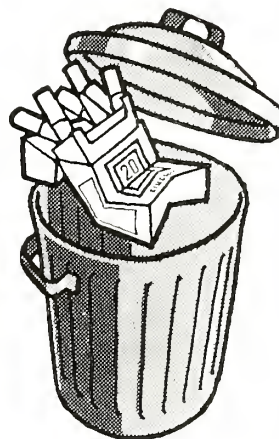
The Royal Pharmaceutical Society will be distributing No Smoking Day leaflets to all pharmacies, while the National Pharmaceutical Association will be inserting an A3 No Smoking Day poster in the March *Supplement*, due out at the end of this month.

The NPA is targeting women

## Let's packet in!

smokers in a Press release "Smoking is killing more and more women".

The Government has proposed six new warnings for cigarette packs and other tobacco products, including "Protect children. don't make them breathe your smoke".



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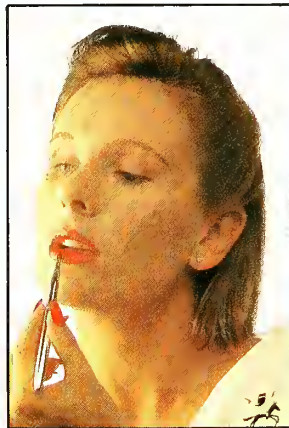
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by  
*Lady Jayne*



# PHARMACY update

## Problems with PPIs

One criticism levelled at patient package inserts (PPIs) is that they worry patients unduly about the risk of adverse reactions. Other evidence shows that true adverse reactions are detected more quickly if patients know what to expect. A survey from Belgium has assessed the impact of PPIs for antihypertensive drugs, revealing that there is truth in one of these arguments.

GPs noted the symptoms reported, spontaneously and after prompting, by more than 700 patients receiving long term treatment with antihypertensive agents — mostly beta-blockers and thiazides alone or in combination. Of the 53 products taken, 16 per cent contained PPIs and the remainder had traditional, technical GP inserts.

Overall, a third of patients did not read any of the inserts; 31 per cent read them superficially and a further third read them thoroughly. Young patients read more leaflets and the higher the educational level, the more thoroughly was the leaflet read. Among those who undertook full time education after 18 years of age, three-quarters read the leaflet in detail. By contrast, only a quarter of patients who left school at 14 did so. The PPI and doctor-orientated leaflets were read equally often.

Overall, 24 per cent of patients attributed at least one symptom to their treatment and this was more common among the better educated irrespective of whether they had read a leaflet. Spontaneous reporting was more likely by those who had read a leaflet but when all adverse reactions (spontaneous and prompted) were considered, the leaflets did not increase reporting.

Leaflets therefore do not increase the overall incidence of adverse effects but do improve patients' awareness of risks. Lack of interest among patients of lower educational status highlights the need to reinforce the message of PPIs at the time of dispensing. *European Journal of Clinical Pharmacology* 1990;39:551-4

## Exclusion diet for eczema

Some cases of eczema may be due to allergy, although it is usually difficult to identify the allergen. One method is the exclusion diet, in which the child is admitted to hospital and given an elemental diet, then challenged at intervals by possibly antigenic foods. Needless to say, this is only attempted when eczema is very severe and unresponsive to aggressive treatment with steroids or phototherapy.

Sometimes, this disruptive regime works. A series of 37 children with severe eczema were admitted and fed on unflavoured Vivonex for 30 days; topical steroids were discontinued although sedative antihistamines and emollients were allowed. When the eczema improved, three foods were reintroduced and, if there was no adverse response, the child discharged to a home free of pets and low in house dust mites.

No improvement was seen in four children, who were then treated with systemic steroids. Six initially responded but relapsed after several months. In the remainder, improvement began after two weeks and was sustained during the reintroduction of food. However, eczematous reactions occurred even after eating foods as bland as peas, potatoes, chicken, lamb, banana and corn; half of the children also reacted when they returned home.

This study shows that even severe eczema can be tackled with some success but only after great effort by child and family. It also demonstrates the wide range of foods to which children may react but, after a month of a highly unpalatable elemental diet, they were well motivated to try anything.

*Archives of Diseases in Childhood* 1991;66:93-9

## HMGCoA reductase inhibitors

The introduction of HMGCoA reductase inhibitors lovastatin (in the USA), pravastatin and simvastatin has coincided with a revival of concern about high blood cholesterol.

A new study from Italy has confirmed that these agents are more effective than the fibrates or resins at reducing cholesterol. In a six-month trial in 385 people with cholesterol greater than 7.25 mmol/l a combination of diet plus pravastatin reduced cholesterol levels by 23 per cent compared with 14 per cent after diet plus gemfibrozil. However, although pravastatin reduced low density lipoprotein by 75 per cent more than gemfibrozil, the favourable high density lipoprotein increased by only 5 per cent with the reductase inhibitor, compared with 13 per cent with the fibrate.

Because experience is still limited, there is less confidence about the safety of the new agents compared with their older rivals but preliminary experience is promising. Data from an American placebo-controlled trial of lovastatin, 20-80 mg/day, in 8,245 patients over 48 weeks revealed a higher incidence of elevated serum enzymes (up to 0.9 per cent) and myopathy (up to 0.2 per cent), which were dose-related. There was no evidence that lovastatin disturbed sleep. Only constipation appeared to be more common, with an excess frequency of 3 per cent. These minor effects must be weighed against the benefits of reducing serum total cholesterol by 17-29 pc over the dose range studied.

*Archives of Internal Medicine* 1991;151:43-9 & 146-52



## Lithium and the kidney

Nephrotoxicity is a risk of chronic lithium therapy, especially if serum levels are too high. The first prospective study of therapy lasting 20 years has now been reported from Scandinavia, showing that the duration of therapy is not a further risk factor.

Renal function tests, performed in 27 patients ten years after starting lithium therapy, were repeated a decade later; this included urine concentrating capacity, creatinine clearance and glomerular filtration rate. At the start of the treatment, the recommended therapeutic concentration of lithium had been 0.7-1.2 mmol/l; now it is 0.6-0.9 mmol/l. Accordingly the average initial serum lithium concentration fell from 0.92 mmol/l to 0.8 mmol/l over this period. Some patients who initially were treated with a multiple daily dose regime were switched to a safer, single daily dose; however, they continued to have a higher urine output than others who had always taken a single daily dose.

Eight patients stopped lithium after an average 18 years, due to polyuria in two cases and renal insufficiency in a third. In the remainder, renal function was stable for up to 20 years. Long term lithium therapy therefore does not appear to be nephrotoxic in the absence of high blood levels. *British Journal of Psychiatry* 1991;158:53-8

*Research Digest is a regular series written by drug information specialist Steve Chaplin MRPharmS, looking at current developments in medicine.*





# A RANGE THAT WORKS TOGETHER, SELLS TOGETHER.

That's what we've found out from a study of how pharmacy displays affect the sales of the E45 range.<sup>1</sup> Both the sale rate and unit sales go up at least 10% when the whole range is displayed together.

Frankly, we weren't surprised. After all, Cream E45, Wash E45 and Bath E45 aren't just effective products in their own right. Together, they add up to a complete dermatological programme, effective for a wide range of dry skin conditions.

Wash E45 a dermatological washing cream has a unique non-drying formula that cleanses effectively without disturbing the skin's natural barrier of oils.

Bath E45 with its long-lasting emollient effect, is ideal for soothing widespread dry skin problems, especially in

such serious disorders as eczema and psoriasis.

Cream E45 has for more than 36 years been recommended by dermatologists to soothe and protect dry skin. When used together as a skin-maintenance programme, these products enhance one another's effect. And, as our study has shown, this is precisely the way they work on your shelves.

We hope you'll display the E45 range together. After all, this way you'll be promoting more than just your sales. You'll be promoting better skin care.

1. Nielsen Insight Analysis, 1990. Taken from the Nielsen Pharmacy Retail Index Data (excluding Boots) for July/August 1990.

## E45

DERMATOLOGICAL SKIN CARE





# Make the right move

Eileen Wilson, MRPharmS, reviews opportunities for pharmacists to help elderly or disabled customers and their carers





Reaching retirement age means more time for hobbies, travel and doing all the things you have put off because of lack of time. But some everyday tasks may become frustratingly difficult. The elderly are the largest users of pharmacy services, and more and more retailers are taking time to advise on equipment that can bring about a marked improvement in the quality of life.

Equipment for the elderly and disabled, was until a few years ago, difficult to obtain. Although a wide range of aids, from commodes to tap turners, could be obtained through social services departments, availability and waiting times varied greatly around the country. And with Government reorganisation of community care services over the next few years, more and more people will be buying equipment themselves. Pharmacists are often asked about aids for living, says Mary Allen from the National Pharmaceutical Association's Information Department.

One of the major problems for retailers wanting to stock items is lack of space. Suppliers have brought out catalogues displaying a wide range of appliances that make selection easy for customers and enable retailers to offer a wider service. For more than a year, pharmacists have been able to order a special selection of goods from AAH's Home Health catalogue. And since last October, Unichem's 5,000-plus members now have the Simple Solution catalogue, a distillation of over a 100 items from Nottingham Rehab's Ways & Means catalogue.

### Caring via Unichem

Jason Tucker, Unichem's medical products manager says: "We are trying to allow pharmacists to play the fullest possible role in the community." The pharmacist is in a unique position because he knows his customers quite well and should be able to identify potential beneficiaries and tell them about the new service, adds Mr Tucker. Being aware of their difficulties and suggesting an appliance to make tasks easier when handing out a prescription for an anti-arthritis agent, for example, brings appreciation from customers. "It helps to create a bond between customer and pharmacist."

The Simple Solutions colour catalogue is divided into eight sections covering "easier" kitchen, household, dressing, bathing, mobility, exercise, leisure and comfort. Each item shows a photograph alongside details of how the aid works, and its advantages, as well as a catalogue reference number. Orders are placed with Unichem and delivery is within 21 days.

Jason Tucker estimates that the market for disability aids is worth about £2m per annum, and still very much in its formative stages. But potential growth is substantial, he says, because only 5 per cent of sufferers seek medical advice. The shift of patients from long term hospitalisation into the community is "quite staggering". The move is on to get them into the community but a larger degree of independence is required in that environment, says Mr Tucker.

By the year 2000 the number of people aged 85 and over who are most likely to be disabled and have the highest demands for care will have increased by almost 50 per cent. It will go on rising into the next

century. In 1955 there were 5.5 million people aged 65-plus in Britain, and the projection for 2025 is 11.3 million, says Mr Tucker.

"Old age should not always be seen as being a problem, but should be identified from the pharmacists point of view as an opportunity to help," adds Mr Tucker. And he disputes the view that elderly people may not have the means to pay for goods: "There has always been a tendency to equate disability with poverty and that is very much a mistake." But he warns, "the products won't sell themselves". They need quite a lot of input and "proactive selling" from pharmacists.

### Home Health from AAH

While Unichem used one supplier's catalogue, AAH felt that it was important to develop their own and use a number of sources. So far 2,000 Home Health catalogues have been issued at a price of £20 each. Layout is described as user-friendly and as well as the product guide, there is advice on customer care, and, for instance, how to measure for walking sticks. The loose-leaf format enables regular updating and replacement pages are sent free-of-charge to retailers.

The introduction of the Home Health range was a logical extension of AAH's portfolio, says Nigel Green, marketing manager at the Kingswinford Healthcare centre: "More and more people are turning to their local pharmacy for advice on health matters. Many people, or their carers, who need a little help to maintain their quality of life, possibly don't even know that these products exist."

To help overcome the problem of lack of

display space, AAH introduced a starter range of about 30 smaller items from the catalogue. Says Nigel Green: "We have chosen the fastest moving products for the starter range. None of them are very expensive which is important for people venturing into new lines."

The starter pack includes nail brushes, bath mats, No-Rinse shampoo, shoelaces and horns, kitchen utensils, V-shaped cushions and urinals. AAH also recommend how many of each item to stock. Eleven new products have been added to the Home Health range including therapeutic putty, a toothpaste tube squeezer, magnifiers, a long-handled comb and a stacking commode chair. Six models of wheelchairs have also been introduced.

Many of the new additions have been selected with nursing and residential homes in mind, and Mr Green encourages pharmacists to take the catalogue along while visiting homes. He cites the example of one pharmacist who visited a number of homes one Sunday and returned with a large order, including items like over-bed tables and drinking cups.

Merchandising material for Home Health centres includes an eight-page leaflet, and an A3 display poster.

Many of the 180 or so items in the Home Health catalogue are stocked at local branches. Items not in stock are transferred to the Home Health Centre where they are despatched directly to pharmacies on the day the order is received.

Mr Green says they have been very pleased with the response from pharmacists to the Home Health initiative. They continually get positive feedback from customers including suggestions of items that could be stocked in the future.



The Stannah Rail Stairlift installed at Giovani Chemists



# How to keep mobile — out and about

With the general public and shopkeepers being increasingly made aware of the needs of the disabled as they get out and about to lead near-normal lives, we look at some of the aids available to keep them independent and mobile



*Sun rise Medical's Sterling XL Scoota on the move*

More and more pharmacies are supplying wheelchairs by either keeping a range if space permits, or obtaining them directly from wholesalers according to specific requirements. Some are supplied on a loan basis.

A number of models are available free through the NHS wheelchair service but some people prefer to buy their own following recommendation by a therapist.

A useful guide to the hundreds of models of proprietary chairs on the market was published by the Royal Association for Disability and Rehabilitation last year. It includes details of models and accessories available, factors to be considered when choosing a chair and photographs and details

of a wide range of models, and suppliers names and addresses. Choosing a wheelchair by Judith Male and Bert Massie, is available from RADAR, 25 Mortimer St, London, W1N 8HB. Price: £4.50 inc p + p.

## 30 years in chairs

Cory Pharmacy in East Finchley, North London, have been supplying wheelchairs and other rehabilitation equipment for the past 30 years.

Pharmacist David Meedleman says a wide range of models are offered for sale or

### VAT exemption

Equipment supplied to a disabled person for domestic or personal use is exempt from VAT. This includes medical or surgical appliances designed solely for the relief of a severe abnormality or injury; commode chairs and commode stools; chair lifts or stair lifts and some wheelchairs.

Hearing aids (apart from those designed for training of deaf children), dentures, spectacles and contact lenses are not VAT exempt.

☐ Forms on which VAT can be claimed back are available free from AAH Pharmaceuticals.

hire. Models include a car transit chair with small 12.5in in wheels for pushing and a self-propelled chair with 22-24in wheels that can also be used by an attendant. A number of electric models are available either as chairs or trikes — scooters that can be used for shopping by those with limited mobility.

Prices start from about £300 for basic manual models. When choosing chairs criteria that need to be considered include suitability for the jobs that the user has in mind, comfort and degree of manoeuvrability in confined spaces.

Pharmacists must be able to give advice and be knowledgeable about products, says Mr Meedleman. Customers usually have an idea of what they want, but do not know what is available.

Cory act as agents for a number of manufacturers and charge ex-factory prices. A problem for a lot of pharmacists who are not agents is that they are expected to purchase chairs at retail prices, making them uncompetitive, says Mr Meedleman. "It is a tie-up of capital which is not productive. Margins are quite small on wheelchairs and other disabled aids," he says. "It's not a way of getting rich. It's a service to the customer."

Starting from scratch involves a large investment in time, learning, stock and storage space. At Cory, wheelchairs are serviced and spare parts obtained and changed when necessary.

Mr Meedleman says that another problem in the aids for disabled market is that many manufacturers sell directly to the public and a lot of products are not available to pharmacies.

## Sun rises with a Sprint

BEC Sprint is the latest model to join Sunrise Medical's range of powered wheelchairs. Designed "with the needs of more active, fashion conscious users in mind", it comes in red, blue, black or yellow folded frames. From March, neon pink and neon yellow will also be available.

The company says hang glider technology has been used to give a lightweight, durable frame. The chair comes with height adjustable arm rests, a choice of three seat width settings, swing-away foot rests and adjustable angle foot plates.



Optional accessories include a lap seat belt, headrest, elevating leg rest, remote attendance and chin controls, puncture proof tyres and an adjustable backrest.

Sunrise Medical's range also includes powered Scootas. Stuart Munroe, director of dealer sales, says that products are only supplied through a national network which includes a small number of pharmacies. Measurement and fitting for chairs is very important. The company does offer training for retailers. Sunrise Medical. Tel: 0384 480480.

## Aiding compliance

Active promotion is important when selling compliance devices, says David Walmsley of W&W Medsystems.

Pill dispensers, eye drop aids and other devices provide savings of health professional's time when medication is taken correctly, he says, but funds for purchase of these items are not usually available from social services.

Mr Walmsley says that by seeking out those patients with compliance problems, community pharmacists can enhance their business and their standing with customers.

W&W Medsystems range includes a pill crusher, described as a "modern mortar and pestle", a pill splitter that requires light pressure from one finger and a device that ejects tablets from blister products.

Dispensers include a pouch, tray and the Medi-wheel that can be used by those with dexterity problems and the blind.

## Giovani reach new heights

Pharmacies that operate on two floors may want to follow the example of Giovani Chemists in Essex, in helping customers with mobility problems.

They installed a stairlift so that customers could reach the gift and perfumery department on the first floor, and it is used up to ten times a day.

Fitting takes just a few hours, say Stannah, and all that is needed is a suitably placed electric power point. The rail fits to the wall and the chair stops automatically at the top or bottom of its run, or when the button is pressed.

Stannah's range also includes the Access lift with a large platform for wheelchairs.



Suba-Seal's deluxe giant foot muff (£5.25 trade; £9)

## Easier eye drops

Owen Mumford have introduced a compliance aid for eyedrop installation. Designed by a company employee who had problems administering eye drops to a relative, Autodrop fits most types of container and is moulded to fit over the eye.

Another version will soon be available to fit the Timoptol eyedrop bottle, says John Webb, marketing director. Owen Mumford. Tel: 0993 812021.

## DLF's new book

"How to get equipment for disability" was published by the Disabled Living Foundation, last year. Aimed at a wide range of professionals, policy makers and consumers, information includes: the type of equipment available, prescription referral procedure, supply and delivery, maintenance and follow up.

Over 30 chapters cover topics from daily living equipment to equipment for renal dialysis and breast, eye and hair prostheses. Services provided by pharmacists are mentioned under stoma care, incontinence and other sections, however an appendix listing suppliers only refers to Boots saying inquiries should be made at local branches. "How to get equipment for disability" is published by Jessica Kingsley for the Disabled Living Foundation. This book retails for £12.95.

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# Extended role prominent at LPC Conference

Payments for continuing education, advising on minor ailments, second pharmacists, controlled dosage systems and inner city pharmacies were all called for at the Local Pharmaceutical Committee's Conference on Monday: not all found favour.

Those motions lost included calls from City and East London LPC for incentive payments to inner city pharmacies. Proposer Michael Long pointed out that GPs in these areas receive additional payments but pharmacists get nothing, despite higher expenses.

Norfolk LPC sought to encourage the rational distribution of pharmacies by reducing the front-loading fee and using the money to target necessary pharmacies. David Coleman, proposing the motion on behalf of Norfolk LPC, said pharmacy as a profession will be evaluated partly with public convenience in mind. Support for the motion would give PSNC a mandate to address both the problem and a way to surmount it.

Mike Smith from Devon voiced strong opposition. The Government already wished to reduce the number of pharmacies, he said, and the abolition of front loading would undoubtedly hasten the closure of pharmacies. It was naive to think that the money released will be targeted to provision of services in necessary areas, he said. The motion was lost.

A call for payment to be negotiated with the Department of Health for an item of service fee for supplying medicines in controlled dosage systems was also rejected.

Jeremy Clitherow, speaking on behalf of Liverpool LPC, said many pharmacists feel they are being coerced into using CDS, and providing them at their own expense. Their use involved additional work, he said, and it made sense for an equitable item of service fee to be paid for this.

Strong opposition came from Philip Hunt (Avon LPC) who resented the fact that certain multiples had taken unilateral action to supply this service to acquire prescription business from independents.

"To reward these multiples now they have had so much success in their actions would only seem to add to the injury," he said.

A proposition from Lincoln LPC that the professional fee after the first 6,650 items a month should be replaced with a specific payment to encourage employment of a second pharmacist was also rejected. The extended role of pharmacy would increasingly entail absence from the pharmacy, said PSNC member Don Ross, on behalf of

Lincoln LPC. An appropriate differential should be investigated for those pharmacists trying to improve their services by employing a second pharmacist.

Two motions put forward by Durham LPC concerning the need for "new money" for the extended role and for payment for advising on the treatment of minor ailments were both carried.

Calls for the DoH to fund and promote postgraduate education came from Hereford and Worcester LPC. A lump sum payment within the non-core services could be made to those pharmacists who attend accredited postgraduate courses. However, the motion (which was carried) stopped short of linking such study with competence to practice.



Mike Smith, Devon



Patricia Alesbury, Hereford & Worcs



P Patel, City & East London

## NHS superannuation for contractors?

A motion calling for pharmacy contractors to have the option of NHS superannuation was carried by the LPC Conference by just two votes.

The motion was proposed by Alan Woodcock of Sefton LPC. "On retirement many contractors rely for their future security on the proceeds from the sale of their business plus income from any private pension plan to which they may have contributed," he said.

Commenting on the motion, David Sharpe said dentists and doctors were able to take part in the scheme as they had individual contracts. It may be a prerequisite for this motion that contracts be taken out with individual pharmacists, not limited companies. The motion was carried by 48 votes to 46.

An emergency motion from Hereford and Worcester LPC debating doctor dispensing also found favour with delegates.

In the light of recent rural decisions, PSNC was asked to set up a co-ordinated national campaign to stimulate awareness of doctor dispensing.

■ Liverpool LPC's motion debating conference arrangements caused some confusion. Jeremy Clitherow, on behalf of the absent LPC members, received

an undertaking from David Sharpe that a question and answer session be permitted at future conferences.

William Mallinson of Gloucestershire called for future conferences to be held on a Sunday at an easily reached venue. He felt the Conference, which caused inconvenience and expense, was held to coincide with the PSNC dinner.

David Sharpe defended the current arrangements. It was not possible to arrange the dinner on a Sunday and still attract a large number of MPs, he said. A vote

on not separating the Conference and dinner was carried.

■ Devon LPC's moves to ensure details of LPC candidates are circulated with voting papers was defeated by conference.

■ Gwynedd LPC tabled a motion asking for a compensation fund for pharmacists finding themselves with unsaleable pharmacies.

Suggestions that money could come from other contractors was opposed by Ian Mackey of Gateshead. He felt the Government should be responsible for providing funds. The motion was lost.

## On the script front

Calls for restrictions on the number of treatment days of prescription medicine were again passed by Conference.

Somerset LPC called for a definition but did not specify a particular period. Oxford LPC called for the DoH and General Medical Services Committee to adopt 28 days as the maximum.

■ Sunderland LPC's motion that the Prescription Pricing Authority should not return prescriptions for minor errors or when there was no alteration in price was also

passed.

■ The PPA was also criticised by Bolton LPC. Keith Williams told Conference of occasions when contractors whose payments had been disallowed were only made aware of the fact after a chance inquiry. The motion calling for the PPA to inform contractors was carried.

■ Sunderland's call for a modification of the pricing procedure so "zero discount" items would automatically have no discount deducted was carried.



# In our yen for even faster processing, we've invested in more muscle.



Colorama, Britain's fastest-growing photo finishers is well into its £2m a year development programme for the independent retailer. Colorama were the first organisation to offer overnight processing and twice-a-day deliveries and continuing their investment in the latest Hi-Tech Photo Processing Equipment they've just installed the world's fastest paper processor made by Noritsu. Capable of delivering over 45,000

superb prints an hour, it will allow Colorama to extend their service even more to independent retailers throughout the whole of Britain by 1991. For the dealer this means better quality prints, faster turn round and more profit. In today's difficult economic climate, a contract with Colorama is like having money in the bank. Why not give us a call (instead of your bank manager).



## Developing and Enlarging into the 90's.



# Counting the cost of stock control

**Stock is one of the more liquid assets of a pharmacy business but its management holds pitfalls for the unwary. In the first of a series on the principles of stock control Eric Jensen B. Com., MPharmS, relates pharmacy stock to the balance sheet and profit and loss account**



Many years ago I met a proprietor who had consistently undervalued his stock. Once he had started on this path he found it a terrible problem to get things straight; he just did not dare have a professional valuation. Whether he eventually took steps to correct matters I do not know, but if not he would have left a sad problem for his estate when he died and the Inland Revenue discovered his true position.

Stock has a number of unusual properties, but chief among them is that it is your only asset which is constantly being sold and renewed. It therefore has a key position as part of your assets on the balance sheet and as a factor in calculating your gross profit.

You can know your gross profit accurately only if you have precise opening and closing stock figures for any accounting period. These figures, plus accurate sales and purchases data, enable you, or your accountant, to reach the correct gross profit. And without a properly assessed gross, the net profit figure is valueless.

## Liquid assets

Assets in the balance sheet are usually tabulated in reverse order of liquidity. Cash in hand or at the bank is the most liquid of assets; it appears at the end of the list of assets. Goodwill, not often shown as an asset, is normally the least liquid of assets and would appear at the top of the assets list. To turn goodwill into money (and it can be extremely valuable) you would normally sell your pharmacy.

Stock is less liquid than cash and creditors, but more readily turned into cash than vans, cars, fixtures and fittings, and other fixed assets. Only good, clean, saleable stock should be listed as an asset. Moreover, the basis of valuation should be consistent from year to year, or in any shorter accounting period.

The closing stock for one year is the opening stock for the next. This means that if the closing stock is overvalued for the current year the gross profit will be boosted by the same amount. However, next year the gross profit will fall by this same sum provided the

year-end stock is correct. This is an area where it is worth taking some care, as variations like this can provoke awkward queries from the tax people.

Similarly, if you buy a pharmacy from someone whose stock has been undervalued in his or her accounts, beware. If you use the vendor's closing, undervalued, stock as your opening stock, your year-end profit will be greater than it would be had the stock been correctly valued. You would be wise to employ the correct valuation, as per the valuation for transfer of the pharmacy. Integrity, peace of mind and factual knowledge on your business unite in demanding accurate stock valuation.

## Efficiency guide

A major indication of how efficiently a pharmacy is run is the rate of stockturn. But be careful to avoid the error of dividing sales at retail prices by average stock at cost; sales should be brought down to cost by deducting the gross profit, then this figure should be divided by average stock. Note, too, that you cannot know average stock accurately unless you have a daily stock figure, which can be found by taking the total of these per year and dividing by 365 or 366. However, the practical customary alternative is to add the opening and closing stock figures and divide by two.

Broadly, if stockturn is low the gross percentage profit should be higher than with a rapid stockturn, as normally you buy in large quantities in order to receive high discounts. However, if your stocks are high and your overall gross percentage is low, investigation is needed.

The gross percentage you can achieve will depend on many factors, including the proportion of NHS dispensing in the profit, the mix of other merchandise handled, and the shrewdness of your buying.

If 80 per cent of your takings come from NHS dispensing at around 20 per cent gross you will need very high margins on the remaining fifth of your turnover to compensate. Yet we must remember, with all this talk of percentages, that we live on cash, not on percentages alone.

A study of the "businesses for sale" advertisements gives interesting insight into stockturns and gross margins: the variations show how dangerous it can be to generalise.

When stockholding has to be financed by bank borrowing it is important to strike a balance. To borrow at interest of 15 per cent or more per year is clearly good business if it produces say 5 or 6 per cent profit on sales five or six times annually. Even so, the cost of keeping goods in stock should not be underestimated. Apart from the actual purchase cost there are the costs of valuation, space, heating, lighting, and insurance. These added costs are likely to amount to several per cent of the stock value.

Where capital to finance stockholding is strictly limited the principle should be to make the stock work hard. Stock is money, and the key consideration is to satisfy customer

demand. In such restricted circumstances it is wise to be satisfied with a lower gross percentage with higher stockturn if this means an appropriate variety of stock can be held. Direct buying for discounts might need to be reduced or eliminated as to make 22 per cent or 23 per cent gross ten times a year would be preferable to 30 per cent five or six times.

When adequate capital is to hand, direct buying can help add a few per cent to the gross profit. Even 1 per cent extra could bring in £2,000 or £3,000 for a modest-sized pharmacy. Against this gain must be offset the costs of holding stock already mentioned plus the opportunity cost factor. If money is not invested in stock it can earn at present around 14 per cent before tax in a building society, with a fraction of the risk. A fundamental commercial question to pose is: Where is money earning the highest return related to risk?

Remember that trends from year to year are most important. It is worthwhile to check stock levels against what is owed to suppliers, and bank interest payments; overstocking increases risks of obsolescence while understocking may lead to lost sales. The cost of having even a small proportion of goods unsold from any order should also be kept in mind: with low margin lines two or three left on the shelf from a dozen bought can wipe out any profit.

Information extracted from the accounts will enable you to assess the cost per cubic foot of your space, in rent, heat and light, and other overheads. This should be compared with the space occupied, the profit margin, and the rate of stockturn for various types of merchandise.

## Sales analysis

Arrange with your accountant to show on the profit and loss account an analysis of sales into the main sectors of your pharmacy, that is into NHS dispensing, cosmetics, photographic, and so on. Compare this data with the stock analysis from your accountancy stock valuation.

Most, perhaps all, pharmacists carry in stock certain slow-moving lines as a service. Be aware of the amount of money tied up: it should be a very small percentage of your total stock value. In general we are concerned with emergency medical or surgical items rarely wanted, but wanted at once when required. They should be distinguished from other non-emergency products sold only occasionally to a few customers.

The facts you extract from your accounts and balance sheet could usefully be supplemented by setting-up a customer panel, for first-hand information from the consumer is invaluable. The customer, after all, finally decides whether your stock policy is sound. *Eric Jensen is the author of "Pharmacy: freedom or slavery?", "Success the gentle way", and of several other books. Details from Mr Jensen, 6 Attree Drive, Brighton BN2 2HN. Tel: 0273 605293*



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# BUSINESS NEWS

## Recession squeezes retailing

Retail sales have registered a fall for the first time since the CBI began its distributive trades survey in 1983. Wholesaling was equally gloomy with companies reporting a sharp decline in the number of orders placed with suppliers compared with a year ago.

Nigel Whittaker, chairman of the Confederation of British Industry's distributive trades panel, says retailers are experiencing a bleak new year with no foreseeable respite.

Pharmacy retailing continues to look relatively secure against this generally gloomy background. Some 61 per cent of the pharmacy respondents in the survey recorded the same or a greater volume of sales than in the same month a year ago. And 78 per cent expect the same or greater volumes of sales in February.

However, 52 per cent said sales volumes had been poor with 35 per cent expecting February to be poor, too.

Medeva's extraordinary general meeting has approved the acquisition of Wellcome's human vaccines business. However, the deal is still conditional on clearance by the Office of Fair Trading.

## Numark launch open pharmacy loan scheme

Numark have launched a pharmacy finance scheme which leaves pharmacists free to buy stock where they wish. This is the first in a series of finance schemes planned by the voluntary trading organisation.

Money will be loaned for pharmacy purchase, refurbishment, major extensions and for medium to long-term capital investment at between 1 and 2 per cent above base rate. The pay-back period for loans is 10 to 25 years.



Terry Morris

Managing director Terry Norris told *C&D*: "Clearly there are a number of financing schemes available in the sector. If they have anything in common they are very demanding on the retailer."

"We say: we must relate to the partnership and camaraderie between community pharmacists and wholesalers."

"In the Numark scheme there is no obligation to give X per cent of business to the company which has helped put the package together. Other wholesaling organisations will say 'you have to spend say 80 per cent with us'."

"We offer a similar deal but you can spend where you want."

The finance scheme is targeted at pharmacy businesses which are looking for sums over £15,000, but the amount which can be borrowed depends on the amount of security on offer. There is no upper limit.

Normally the pharmacist would be expected to provide 20 per cent of the total project cost, but the Numark scheme has some flexibility. Additional amounts are said to be available where adequate security is provided.

An initial assessment fee of £200 is taken to discourage frivolous applications but this is deducted from the standard arrangement fee when the finance goes through. The arrangement fee is a one-off payment which goes to the loaning bank and the finance company and is currently set at 1.5 per cent.

Numark's wholesale members have the leaflets explaining the scheme which they will be sending out to pharmacist members.

## New force

A six-strong UK hospital sales force has been recruited by Antigen Europe. The move is intended to enable the company to build on existing generic and branded injection preparations business in the UK and develop market share in the tablet business.

The new team comprises Susan Davies, Bristol and Wales; Juliet Alexander, Yorkshire and Trent; Anne-Marie O'Callaghan, North Thames and East Anglia; Judith Hurst, Scotland and the North of England; Jane Kilgour, Mersey and West Midlands; and Jilla Sabetti, South Thames.

## Retail down

Retail sales have fallen according to provisional figures released by the Central Statistical Office.

The seasonally adjusted retail sales volume index for January is 1.3 per cent down on December while between November and January sales were 0.5 per cent down on the preceding three months. The November-January figure is also 1 per cent down on the same quarter a year ago.

We would like to make clear that the Intercare story in last week's *Business News* referred to the Intercare Group and not Intercare Products Ltd, the OTC company of Sandoz Pharmaceuticals.



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## Rhône-Poulenc break even despite \$289m charges

Rhône-Poulenc Rorer have recorded sales of \$2.9 billion, up 19 per cent on the previous year on a comparable basis.

**Turnover up 173pc to \$1.1bn**

**Pre-tax profit down 641pc to \$1.69m**

**Earnings per share up 116pc to \$2.42**

**Total dividend up 3c to \$0.84**

Analysis of the results is complicated by the combination of Rorer and Rhône-Poulenc's human pharmaceuticals businesses in May last year. The figures include 12 months of the Rorer Group Inc and just four months of the human pharmaceuticals arm of Rhône-Poulenc Rorer.

If the effect of currency fluctuations is excluded the comparable sales figure is just 8 per cent up on the previous year.

Despite this modest improvement in sales, pre-tax profits for the company plunged from \$125.3m to \$16.9m, although this takes into account some \$289.3m of costs associated

with the merger.

In 1990, net income for Rhône-Poulenc Rorer was down to \$1m from \$84.9m the year before.

Commenting on the results, chairman and chief executive Robert E. Cawthorn said: "The merger has been completed quickly and effectively. The new global company is now fully operational and, as can be seen from the fourth quarter results, we are already seeing the expected benefits of the merger."

"We are well along in implementing our plans to trade or sell non-strategic products and other assets. Similarly, the focus of R&D has been narrowed."

Fourth quarter sales for the company reached \$1.1bn, 18 per cent up on the previous fourth quarter on a comparable basis. Net income for the quarter, aided by gains on sales of assets, more than doubled to \$163m although when currency fluctuations are taken into account the figure deflates to 5 per cent.

The company has announced a dividend of \$0.84 per share.

## Credit card reform

Dual pricing for credit card and cash customers draws closer as regulations and an order on differential pricing are considered by Parliament. The measures, which are likely to come into force on February 28, are intended to ensure customers will not be misled if retailers practise differential pricing.

By March 7 all retailers will

have to indicate with signs at every point of entry and sales what the shop's policy is if different terms apply for credit cards and cash.

Financial director at the NPA Brian Dosser told *C&D*: "Differential pricing will give retailers more flexibility and to that extent will be good for trade."

## Asda offer EPoS data

Asda stores are offering their EPoS scanning data to their suppliers; they believe they are the only supermarket in Europe to do this.

The company is using Trader Marketing Data to put the

service, known as Asda Products Performance Data, in place. Suppliers are being invited to presentations. The service is intended to provide suppliers with data on sales levels of their own and competitors' brands.



*Loffhouse of Fleetwood were flying the flag for Britain at the 21st International Sweets and Biscuits Fair (ISM) in Cologne recently. Doreen Loffhouse told C&D it was the 16th year that the company, who export to 54 countries, had attended the fair. "We consider it a very important date in our diaries." Attendance was slightly reduced on last year, she said with the Americans most noticeable by their absence. The company is hoping that a sugar-free Fisherman's Friend, available in Europe for the past eight years, will show similar success when launched in the UK later this year*

### COMING EVENTS

## Strathclyde birthday

The School of Pharmacy at Strathclyde University is 80 years old and a party is planned for all former students of the University and The Royal College of Science and Technology pharmacy departments.

The event will take place on March 8 at the Albany Hotel, Glasgow. Details from Professor Ian Rodger, Freeport, University of Strathclyde, Glasgow.

## Continuing education

The North West Thames and Oxford Regional Health Authorities are holding study days on drug abuse and women's health.

"Drug abuse — the role of the community pharmacist" will be held at Crest Hotel, South Mimms on March 12 from 2.30pm. "Responding to symptoms — women's health" will be held at the Postgraduate Centre, Edgware General Hospital on March 3, 10am to 4pm.

Details from Claire Anderson on 0865 742277 ext 27177.

### Tuesday, February 26

**Durham County Branch, RPSGB.** Eden Arms Hotel, Rushyford at 8pm. "Prescription pricing" by Mr G. S. Nevard and colleagues.

### Wednesday, February 27

**North Metropolitan Branch RPSGB.** Royal London

Homoeopathic Hospital, Great Ormond Street, 6.30 for 7pm. "Myalgic encephalomyelitis". Joint with the Guild of Hospital Pharmacists. **County of Somerset Branch, RPSGB.** Lyngford House, Taunton, 7.15 for 8.15pm (buffet). "Drug misuse in Somerset", by Dr J. O'Brien, senior registrar, public health.

### Advance information

**Applied Pharmacy Practice Learning Events.** "Update on drug interactions". The Lodge Hotel, Coleraine, March 5 and 12, 7.30 for 8pm. "Patient aids and appliances symposium", Stormont Hotel, Belfast, March 6 at 2pm. Details from Donna McDowell on Belfast 650111.

**British Association of Pharmaceutical Physicians.** "Crisis management — the basic rules" at the Royal Society of Medicine, March 6, at 12.30pm. Details from Elizabeth Borg on 071-491 8610.

**Trade show.** Daniels Pharmaceutical and Wilkinson Health Care at the Hilton Hotel, Castle Donington, March 7 from 3pm to 11pm. Details from Frank Worrall on 0332 40671.

**Society of Cosmetic Scientists.** Medal lecture by Professor Fairweather, (Unilever) at the Royal Society of Arts, London, March 7 at 7pm. Details from Mrs Weston on 0582 26661.

**Pharmaceutical Marketing Society.** Annual dinner at Le Meridien Hotel, Piccadilly, London, March 8. Cost £45. Details from Vivien Bennett on 0403 64898.

**Scotchmen 91.** Exhibition at the MacRobert Pavilion, Edinburgh, March 10-11. Details from Maurice Hoare on 081-302 8585.

**IBC Technical Services.** "Antiviral drugs — from the laboratory to the patient" conference at Royal Lancaster Hotel, London, March 11-12. Fees £475. Details from Catherine Barrett on 071-236 4080.

**Giphac.** Trade fair at Paris Nord Villepinte (hall 3), Paris, March 18-21. Details from Dominique Lecaillon on +31 4221 8492.



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# ABOUT PEOPLE

## Nurofen study grants

Pharmacists Malcolm Qualie and Claire Anderson are the first recipients of the Nurofen Pain Relief Project's study grant.

It was launched last September to support pharmacy-based studies into pain or pain management. Grants of up to £1,500 are awarded, and entry is open to all pharmacists, students, prereg and researchers.

Mr Qualie, unit clinical pharmacist at the Leicester Royal Infirmary, is to examine the effects of self-medication on post-operative pain relief compared with analgesia administered by nurses. Ms Anderson, continuing education lecturer at Chelsea department of pharmacy, King's College, London, is to study the treatment of dysmenorrhoea in community pharmacy.

Application forms for 1991 can be obtained from: Nurofen Pain Relief Project (PP), 4 Cloisters House, 8 Battersea Park Road, London SW8 4BG.

## BPC practice session

Practice research contributions are needed for a special session at the 128th British Pharmaceutical Conference, being held in Liverpool from September 10-13.

The session, in oral and poster format, focusses on original work any aspect of pharmacy practice.

The *Chemist & Druggist* Award, a silver medal and £200, will go to the oral presenter judged of the best quality. The Janssen Award (£100 book token) will go to the best new presenter and the £100 Rybar Award to the best poster.

Details and forms from Hazel Maxted, RPSGB, 1 Lambeth High Street, London SE1 7JN. Closing date, April 26.



*A recent reunion of Bradford students who qualified in 1969 was extremely successful, says pharmacist Alastair Ferguson, who sent C&D a photo to prove it! Present were (standing, left to right) Tom Wright, Ron Purkiss, Howard Levitt, Alastair Ferguson, Roger Skews, Steve Willeress, Richard Range, John McDermott, John Inman, Dennis Marks, Tony Jackson (back), Malcolm Cockedge, Brian Bloom and John Clarke; (seated) Gillian Willeress (née Davy), Margaret Yaxley (née Edwards), Diane Langleben (née Friend), Diane Leaky (née Fraser), Beverley Rilatt (née Rouse) and Angie Dick (née Tilbury). The class of '69 plans to meet up again in five years time*



*Southport pharmacist Philip Bunting (right), and his team at Crowthers have been tucking into a tasty prize they won in a Canderel draw. Also pictured are (left) Ian Lister, regional account executive, Searle Consumer, and Malcolm Fisher, operations manager Unichem, Preston*

## Pharmacist fulfils an ambition

Colin Jones, pharmacist at Blades Dispensing Chemist, St George's Place, Llandudno, is now the proud owner of a traditional red telephone box.

It has long been his ambition to own one. Yet when he mentioned it to his wife, she didn't seem terribly taken with the idea; he then put it out of his mind.

So imagine his surprise when she gave him one for Christmas! "It left me speechless," he says.

It was purchased from a local scrap dealer for around £200, and has cost almost as much to renovate. It took eight men and a forklift to lift the one ton box into his father-in-law's motor showroom where it is being stored before being moved to Mr Jones' home.

The box has created quite a bit of interest, says Mr Jones, but he has no plans to move it to his pharmacy. At the showroom, a telephone extension has been placed inside, so that it "works", he says.

"There are not many of these left in North Wales, but I doubt whether it will become a collector's item," says Mr Jones.

## APPOINTMENTS

### New reporter on C&D

Sarah Purcell has joined the *C&D* team as Beauty Reporter.

She was previously employed as a journalist on another of Benn Publication's titles, *Cabinet Maker*, reporting on the furniture industry. Prior to that she worked for the *Financial Times* newsletters department on *MidEast Markets* and *East European Markets*.

Sarah has a BA combined honours degree in English and French from the University of Leeds.

**Ever Ready Ltd** have appointed Ursula O'Donovan as product manager, responsible for lighting products including torches and cycle lamps. She joins the company from LRC.

**Jeyes Group Plc** have appointed Dennis Deeks as group development director, with special responsibility for corporate planning and acquisition. Derrick Broomfield replaces Mr Deeks as

group finance director; he joins Jeyes from Pizza Hut UK Ltd, where he was financial controller. **Smithkline Beecham Plc** have appointed John B. Ziegler as president of their Pittsburgh-based US consumer brands business.

**Smith & Nephew Plc** have appointed Michael G. Parson as group company secretary. He joins S&N from Bowater Plc, where he was group secretary and legal adviser. **Chemtec Systems Ltd** have appointed Alison Wilson as internal sales administrator. Her role in the area of sales and customer support falls in line with expansion plans, says the company.



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## THE EVENT

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Over two days, Scotchchem will bring together the new products, ideas and services to increase profit.

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Many big industry names have already given Scotchchem their support, and will be showcasing their new and existing ranges and incentive offers for the coming year.

Our prestigious venue for Scotchchem '91 will be the magnificent MacRobert Pavilion, situated in the Edinburgh Exhibition and Trade Centre complex and easily accessible from road, rail and air links.

## PRODUCT RANGE

A wide variety of beauty, pharmaceutical and associated retail products will be on show at Scotchchem, incorporating bodycare and health care products for the whole family. OTC remedies, medicines and generic pharmaceuticals will be on show alongside a comprehensive selection of toiletries, cosmetics, fragrance, photographic products and reading glasses. Computer systems, shopfitting ideas, wholesalers and financial services will all be represented.

## MEET THE PRESS

Scotchchem sponsors, Chemist & Druggist, as well as Beauty Counter and Community Pharmacy will all have stands at Scotchchem.



## NPA

The National Pharmaceutical Association will be at Scotchchem to offer advice and assistance on the services offered to retail pharmacists.

Brochures will also be available.

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## BY BUS & COACH

Services every fifteen minutes from Edinburgh, to a variety of destinations in Central Scotland, pass within 5 minutes walk of the Exhibition Centre.

In addition to the public transport service, MGB has arranged for a special coach service to be provided from Glasgow, Edinburgh Station and Newcastle.

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Edinburgh is served by frequent Inter-City and other rail services from all parts of the country. Over 200 trains arrive daily at Waverley Station, only six miles from the MacRobert Pavilion.

## BY AIR

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